



संजय गांधी स्नातकोत्तर आयुर्विज्ञान संस्थान, लखनऊ

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Ref. No. PGI/CMS/Estt./ 1616 /2020

Date 04.06.2020

Office Order

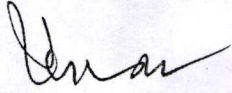
Subject: Revised Guidelines of NON-COVID / Holding Area.

Protocols for NON-COVID Area was circulated vide office order no. PGI/CMS/Estt. 1306/2020 dated 30-04-2020 and thereafter in compliance with the G.O. no. 470/71-3-2020 dated 22-04-2020, a micro management of protocols for NON-COVID / Holding Area was circulated vide office order no. PGI/CMS/Estt./1362/2020 dated 07-05-2020 with constitution of Rapid Response Team to be responsible for functioning of Screening Area-I & II and Holding Area under chairmanship of the CMS.

For smooth and conscious functioning of NON-COVID / Holding Area, the Revised Guidelines for NON-COVID / Holding Area as per minutes of Rapid Response Team dated 01-06-2020 as annexure no.- II are hereby issued.

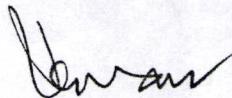
All Heads of Departments, Faculty, Members of Rapid Response Team, Officers, Nodal Officers and Employees are desired to ensure the compliance of the same.

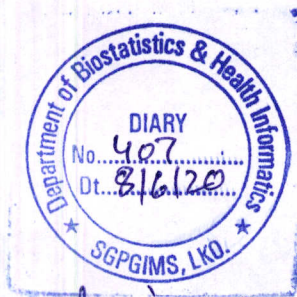
Encl.: Revised Guidelines of NON-COVID / Holding Area (Annexure-- II).



(Prof. R.K. Dhiman)
Director

Copy to: For information & necessary action.

1. Addl. Director/All HODs.
2. Dean / ER./CMS/MS.
3. Nodal Officer COVID-19 / RCH.
4. All members of the committee.
- ✓ 5. HOD, BHI- with the request to upload the same on Institute website.


(Prof. R.K. Dhiman)
Director




4:25 Pm

Plan of action, in case of any patient is found Covid-19 Positive in holding area.

(As per the guidelines received from UP Govt vide order No. 1083/PANCH-5-2020 dated 12/5/2020)

Following SOPs were decided in meeting in director office in presence of Director and Nodal Officer RCH.

1. Any patient who comes out to be Covid-19 positive in Primary holding area, would be transferred to RCH by a dedicated Ambulance with all due precautions as per govt. guidelines, immediately.
2. Patients in holding area, who are admitted adjacent to this positive patient (in same cubicle) would be labelled as high risk contacts and would be kept separately in isolation rooms of Primary / secondary holding area (Medical Oncology ward), depending upon the bed availability.
3. RT-PCR test of all these high risk contact patients would be done on 5th day and they would be quarantined for 14 days and would be followed for development of any symptoms related to Covid-19 disease. They would be repeat tested on 14th day or on the day of development of symptoms. They would be shifted to destination ward only after Negative Covid-19 result on 14th day and would remain isolated in secondary holding area till then.
4. All those high risk patients, whose RT-PCR report on 5th day comes negative, can be sent home on 10th day with advise for Home isolation, if patient's clinical condition permits and treating dept. decides to discharge them. Treating dept. has to advise an RT-PCR Covid test of these patients on 14th day on OPD basis, as per govt. guidelines
5. Since patients admitted in other cubicles of holding area are not exposed to the positive patient, they would be shifted to their destination wards, once their RT PCR report comes negative.
6. Secondary holding area (Holding Area 2) has been created in Medical Oncology ward (Old OPD Block) which can be utilised in future, as and when the number of patients exceed the capacity of Primary holding area (Holding Area 1).
7. Additional donning area has been made just outside the Radiotherapy ward (Old OPD block), which will be used for wearing PPE by HCWs entering secondary holding area. Doffing area would continue to remain same as earlier.
8. All patients and their relatives would continue to wear masks as per govt guidelines circulated from time to time.
9. To minimise the risk of cross infection, patients and their relatives will remain in the cubicles of their admission. They would not go and mingle with patients in other cubicles.
10. Patients staying in the same cubicle would be shifted together once report of all patients comes out negative. This would reduce the possibility of shifting of any patient exposed to a positive patient in holding area to main hospital building.

Nursing in-charge would ensure that patients admitted around same time are staying in one cubicle.

11. Cubicle of holding area, which had a positive patient, would be sealed and sanitised as per govt. guidelines and would remain closed for 24hrs, till disinfection is complete, as per govt. guidelines.
12. Patients admission would continue in remaining cubicles of holding area.
13. Outside Nursing Station which is functioning from Radiotherapy ward, would be shifted to Genetics Ward (Old OPD Block). Land Line No of this Outside Nursing Station is 4078.
14. Additional nursing staff would be required for managing these patients in secondary holding area. (CNO to prepare a contingency roster of nursing staff and be ready always, in case any such need arises)
15. A guard is available 24 hours at entry/exit gate of holding area to monitor / regulate patients/relatives movement. Land line number of this Entry/ Exit gate of holding area is 4822.
16. Already available SOPs of holding area would remain in place and above plan is in supplement to already circulated micro plan wide various office orders mentioned below (and Attached for ready reference);
 - i. Office Order No. PGI/CMS/Estt/1362/2020 dated 07/05/2020
 - ii. Office Order No. PGI/CMS/Estt/1479/2020 dated 19/5/2020
 - iii. Office order No PGI/CMS/Estt/1490/2020 dated 20/5/2020



(Dr. Tapas Kumar Singh)



(Dr. Sanjoy Sureka)



(Dr. Dharmendra Bhadauria)

(Dr. Amit Goel)

(Dr Alok Nath)

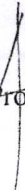
(Prof. Sudeep Kumar)



(Prof. Puneet Goyal)



(Prof Punjita Lal)



(Prof. Amit Agarwal)