GOVERNMENT OF ASSAM
HEALTH & FAMILY WELFARE DEPARTMENT
DISPUR ::: GUWAHATI-781006

No.HLA.274/2020/187 Dated Dispur, the 18th January, 2022

Modified Guidelines For Management of COVID-19 patients in Assam

Whereas, the Country and State is witnessing a third wave of COVID-19 pandemic, possibly due the latest detected variant B1.1.529 (Omicron);

Whereas, the Ministry of Health & Family Welfare, Government of India has issued modified guidelines for Home Isolation for COVID positive patients on 5th of January, 2022, and Government of Assam had accordingly issued COVID testing, treatment and home isolation protocols vide communication No. HLA 274/2020/178 dated 08/01/2022;

Whereas, ICMR has issued an **Advisory on Purposive Testing Strategy for COVID-19 in India** (Version VII, dated 10th January 2022) to clarify who all need to be tested and at what frequency (enclosed herewith as **Annexure- I**);

Whereas, it is observed that a majority of cases of COVID-19 are either asymptomatic or have very mild symptoms and such cases usually recover within 4-5 days at hospital/ home under proper medical guidance and monitoring;

Whereas, the medical experts headed by Director Medical Education, Assam, have submitted their considered opinion in view of the recent observations in changing patterns of COVID-19 vide DME/Covid-19/86/2020/488 dated 17/01/2022 (enclosed herewith as **Annexure- II**);

Whereas, considering the milder nature of the symptoms and early recovery in majority of the patients, especially those at home isolation, there is further need of modifying the isolation and quarantine protocols in tune with the Government of India guidelines for home isolation;

Now, therefore, the following instructions are put in place for smooth management of COVID positive persons in Assam:

Testing

1. In view of the revised ICMR advisory for purposive testing, in supersession of previous protocols, the ICMR guidelines shall be strictly followed for testing of COVID at all places.
2. No emergency procedure (including surgeries and deliveries) should be delayed for lack of a test.
3. Any patient coming to Casualty/ emergency facilities in Medical Colleges/ District Hospitals/ other government and private health institutions, need not be made waiting for COVID test results unless the patient is specifically having COVID related symptoms.
4. Asymptomatic patients undergoing surgical / non-surgical invasive procedures including pregnant women in/near labour who are hospitalized for delivery should not be tested unless warranted or symptoms develop.
5. Patients should not be referred to other facilities for lack of a testing facility. All arrangements should be made to collect and transfer samples to testing facilities, mapped to the health facility.

6. However, the health care professionals shall strictly adhere to all COVID appropriate precautions including personal protection equipment as per guidelines and ensure that the health professionals are not exposed to COVID due to ignorance/negligence while on duty.
7. Patients who stand discharged as per home isolation guidelines and Patients being discharged from a COVID-19 facility as per revised discharge policy need not get tested at the time of discharge.

Discharge of COVID Positive patients

1. COVID positive patients admitted in Covid Care Centres and Covid Hospitals shall be discharged after 5 (five) days of Hospitalisation provided the patient is asymptomatic (afebrile) for at least 3 (three) consecutive days. NO RAT/RTPCR TEST is required at the time of discharge. However, in case of symptomatic patients, decision for discharge shall be taken by the treating doctor based on the clinical condition of the patient.
2. After discharge from the hospital, the patient will have to undergo **2 (two) more days** [instead of 7 (seven) days] of strict HOME ISOLATION with self-health monitoring. In case of appearance of any COVID related symptoms, the patient shall call 104 services or attend the nearest health facility.
3. After a total period of 7 (seven) days ie., 5 (five) days institutional isolation + 2 (two) days home isolation, the patient shall be considered as cured.
4. Asymptomatic patients in Home Isolation shall be considered as discharged on the 7th day.

These guidelines shall come in to force with immediate effect and may be modified on the basis of evolving nature of COVID pandemic.

Other instructions given in the Government communication No. HLA 274/2020/178 dated 08/01/2022 shall remain unchanged until further orders.

(Anurag Goel, IAS)
Principal Secretary to the Government of Assam
Health & Family Welfare Department

Memo No.HLA.274/2020/ 187-A Dated Dispur, the 18th January, 2022

Copy to:

1. Chief Secretary, Assam.
2. Director General of Police, Assam.
3. Principal Secretary to Hon'ble Chief Minister, Assam.
4. Principal Secretary, Revenue & Disaster Management Dept.
5. Principal Secretary, Home & Political, Assam.
6. ADGP (L&O) / ADGP (S), Assam.
7. Commissioner of Police, Guwahati.
8. Chief Executive Officer, Assam State Disaster Management Authority.
9. Commissioner & Secretary to the Govt. of Assam, Health & Family Welfare Department.
10. Mission Director, National Health Mission, Assam, Guwahati.
11. Managing Director AMSCL.
12. Principal Secretary, all Autonomous Councils, Assam.

13. Deputy Commissioner (all districts)/ Superintendents of Police (all districts).
14. Director of Health Services, Assam for necessary action.
15. Director of AYUSH/ Director of Medical Education / Director of Health Services (FW), Assam/ ED, NHM/ State Nodal Officer for COVID-19/ Addl. DME/ OSD NHM/ 104 Call Centre.
16. All Principal cum Chief Superintendents/ Superintendents, Medical College Hospitals, Assam.
17. Addl. Director of Health Services, Assam, Hengrabari, Guwahati.
18. Joint Director of Health Services (all districts) for information and necessary action and wider dissemination to all public and private health institutions in the districts.
19. P.S. to Hon'ble Chief Minister, Assam, Dispur
20. P.S. to Hon'ble Minister, Health & Family Welfare, Assam.
21. Any other concerned.

By order etc.

18/11/2022

Joint Secretary to the Government of Assam
Health & Family Welfare Department

भारतीय आयुर्विज्ञान अनुसंधान परिषद
स्वास्थ्य अनुसंधान विभाग, स्वास्थ्य और परिवार
कल्याण मंत्रालय, भारत सरकार

Indian Council of Medical Research
Department of Health Research, Ministry of Health
and Family Welfare, Government of India

Advisory on Purposive Testing Strategy for COVID-19 in India (Version VII, dated 10th January 2022)

Scope: This advisory on COVID-19 testing strategy is for:

- Early detection of symptomatic cases for quick isolation and care.
- Early detection of infections in elderly (>60yr) and individuals with co-morbidities (diabetes, hypertension, chronic lung or kidney disease, malignancy, obesity etc) for quick care.

Spectrum of Tests available for COVID-19:

- **Point-of-Care Tests:** Home or Self-Test / Rapid Antigen Test (RAT)
- **Molecular Tests:** rRT-PCR, TrueNat, CBNAAT, CRISPR, RT-LAMP, Rapid Molecular Testing Systems, Newer SARS-CoV-2 Omicron or variant detection rRTPCR assays[##]

Who may be tested:

A. In community settings:

1. Symptomatic (cough, fever, sore throat, loss of taste and/or smell, breathlessness and/or other respiratory symptoms) individuals.
2. At-risk contacts of laboratory confirmed cases.
   [*At-risk contacts are elderly (>60yr) and individuals with co-morbidity such as diabetes, hypertension, chronic lung or kidney disease, malignancy, obesity etc*].
3. Individuals undertaking international travel (as per country-specific requirements).
4. International travelers arriving at Indian airports/seaports/ports of entries as per laid down guidelines.

B. In Hospital Settings:

5. Testing may be undertaken as per discretion of the treating doctor with the following considerations:
   - *No emergency procedure (including surgeries and deliveries) should be delayed for lack of a test.*
   - *Patients should not be referred to other facilities for lack of a testing facility. All arrangements should be made to collect and transfer samples to testing facilities, mapped to the health facility.*
   - *Asymptomatic patients undergoing surgical / non-surgical invasive procedures including pregnant women in/near labour who are hospitalized for delivery should not be tested unless warranted or symptoms develop.*

- *Admitted patients may not be tested more than once a week.*

People who need not be tested:

1. Asymptomatic individuals in community settings
2. Contacts of confirmed cases of COVID-19 unless identified as high risk based on age or co-morbidities
3. Patients who stand discharged as per home isolation guidelines
4. Patients being discharged from a COVID-19 facility as per revised discharge policy
5. Individuals undertaking inter-state domestic travel

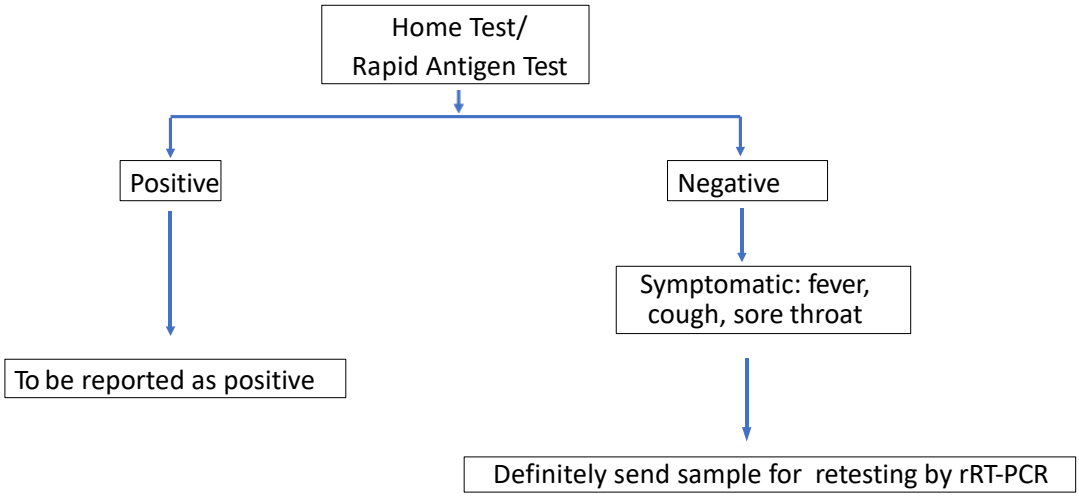
Important points to consider:

- Testing can be undertaken either through rRT-PCR, TrueNat, CBNAAT, CRISPR, RT-LAMP, Rapid Molecular Testing Systems or through Rapid Antigen Test (RAT).
- A positive point-of-care test [Home or Self-test / RAT] and Molecular Test is to be considered confirmatory, without any repeat testing.
- Point-of-care test [Home or Self-test / RAT] should be interpreted as per algorithm at **Annexure**. Symptomatic individuals, testing negative on Home/Self-test or RAT should undertake rRTPCR test as detailed in the algorithm.
- List of approved home tests, RAT and rRTPCR kits are available at the following links:
  - https://www.icmr.gov.in/pdf/covid/kits/COVID_Home_Test_Kit_23112021.pdf
  - https://www.icmr.gov.in/pdf/covid/kits/List_of_rapid_antigen_kits_30122021.pdf
  - https://www.icmr.gov.in/pdf/covid/kits/RT_PCR_Tests_Kits_Evaluation_Summ_23122021.pdf
- Home Testing advisory of ICMR is available at: https://www.icmr.gov.in/pdf/covid/kits/Advisory_Home_Test_kit_19052021_v1.pdf
- All rRTPCR and RAT test results should be uploaded on ICMR portal at: *https://cvstatus.icmr.gov.in*.
- The vaccination status of all individuals tested for COVID-19 must be entered into the Sample Referral Form (SRF) in the RTPCR app both for individuals tested by rRTPCR and RAT. This information is of critical importance.
- Genome Sequencing is done for surveillance purposes and is not required to be undertaken for treatment purposes. Therefore, genome sequencing is to be performed only in a subset of positive samples as per recommendations of INSACOG (Indian SARS-CoV-2 Genomic Surveillance Consortium).
- ##The newer SARS-CoV-2 Omicron or variant detection rRTPCR assays are recommended to be used in areas with limited genomic surveillance capacity for quick detection of emergence of newer variants in such areas.

ICMR's advisory is generic in nature and may be modified as per discretion of the state health authorities for specific public health and epidemiological reasons

Annexure

Algorithm for COVID-19 Test Interpretation Using Home Test/ Rapid Antigen Point-of-Care Test



- *All positive and negative results should be entered into the ICMR portal on a real time basis after performing the test.*
- *Results of samples subjected to rRT-PCR should be entered after the rRT-PCR results are available.*

ANNEXURE- II

GOVERNMENT OF ASSAM,
OFFICE OF THE DIRECTOR Of MEDICAL EDUCATION ASSAM,
SIXMILE, KHANAPARA, GUWAHATI-22
email: dmeassam@gmail.com

No. DME/Covid-19/86/2020/488 Date: 17-01-2022

CORRIGENDUM

In partial modification of the revised protocol for hospitalization, treatment & discharge in respect of Covid-19 patients from hospitals issued by the Government of Assam in the Health Department vide No. HLB.274/2020/177 dtd 08th January, 2022, the following changes are made:

G. DISCHARGE CRITERIA

a. COVID positive patients admitted in Covid Care Centres and Covid Hospitals shall be discharged after 5 (five) days of Hospitalisation provided the patient is asymptomatic (afebrile) for at least 3 (three) consecutive days. NO RAT/RTPCR TEST is required at the time of discharge. However, in case of symptomatic patients, decision for discharge shall be taken by the treating doctor based on the clinical condition of the patient.

b. After discharge from the hospital, the patient will have to undergo **2 (two) more days** [instead of 7 (seven) days] of strict HOME ISOLATION with self-health monitoring. In case of appearance of any COVID related symptoms, the patient shall call 104 services or attend the nearest health facility.

c. **After a total period of 7 (seven) days ie., 5 (five) days institutional isolation + 2 (two) days home isolation, the patient shall be considered as cured.**

d. **Asymptomatic patients in Home Isolation shall be considered as discharged on the 7th day.**

Note: modification is to para G (b) only. Para G (c) & G (d) are additional points. Rest of the protocol remains the same.

17-01-22

Director of Medical Education, Assam