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**Infection Prevention Control Guidelines for suspected cases of
COVID-19/SARS-CoV-2**

Clinical triage includes early recognition and immediate placement of patients in separate area from other patients (source control). A self-declaration form (Annex 1) should be filled up for all suspected cases reporting to the hospital. All individuals, including family members, visitors and HCWs should apply standard, contact and droplet precautions. Place patients in adequately ventilated single rooms. When single rooms are not available, cohort patients suspected of nCoV infection together.

IPC strategies to prevent or limit infection transmission in health-care settings include the following:

- 1. Standard Precautions**
 - 1.1 Hand hygiene
 - 1.2 Respiratory hygiene
 - 1.3 Personal protective equipment (PPE)
- 2. Additional Precautions**
- 3. Environmental cleaning**
- 4. Bio-medical waste management**
- 5. Laundry management**
- 6. Sample collection, storage and transportation**
- 7. Ambulance transfer**
- 8. Dead body handling**

1 Standard Precautions

1.1 Hand Hygiene

<p>Moments of Hand Hygiene Hand hygiene should be performed</p> <ul style="list-style-type: none"> Before touching a patient Before clean/aseptic procedure After body fluid exposure risk After touching a patient After touching patients' surroundings 	
<p>Hand Hygiene Steps—15-30 sec</p> <ul style="list-style-type: none"> Wet hands with soap & water Apply enough soap Rub hands palm to palm Rub back of each hand with palm of other hand with fingers interlaced Rub palm to palm with fingers interlaced Rub back of fingers to opposing palms with fingers interlock Rub each palm clasped in the opposing hand using a rotational movement Rub tips of fingers in opposite palm in a circular motion Rub each wrist with opposite hand Rinse hands with water Use elbow to turn of tap 	<p>Hand-washing technique with soap and water</p> <p>Hand washing should take 15-30 seconds</p>

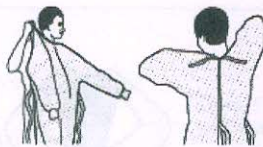



1.2 Respiratory Hygiene

- Offer a medical/surgical mask for suspected nCoV infection for those who can tolerate it.
- Cover nose and mouth during coughing or sneezing with flexed elbow.
- Perform hand hygiene after contact with respiratory secretions.

1.3 Personal Protective Equipment (PPE)

- PPE includes shoe cover, gown, mask, eye protection & gloves.
- Shoe cover should be worn before entering the patient care area (Isolation ward etc.).
- If gowns are not fluid resistant, use a waterproof apron for procedures with expected high fluid volumes that might penetrate the gown.

Donning & Doffing procedures should be diligently & carefully followed as given below.

SEQUENCE FOR PUTTING ON PERSONAL PROTECTIVE EQUIPMENT (PPE)	
<p>The type of PPE used will vary based on the level of precautions required, such as standard and contact, droplet or airborne infection isolation precautions. The procedure for putting on and removing PPE should be tailored to the specific type of PPE.</p> <p>1. GOWN</p> <ul style="list-style-type: none">• Fully cover torso from neck to knees, arms to end of wrists, and wrap around the back• Fasten in back of neck and waist 	<ul style="list-style-type: none">• Keep hands away from face• Limit surfaces touched• Change gloves when torn or heavily contaminated• Perform Hand Hygiene
<p>2. MASK OR RESPIRATOR</p> <ul style="list-style-type: none">• Secure ties or elastic bands at middle of head and neck• Fit flexible band to nose bridge• Fit snug to face and below chin• Fit-check respirator 	
<p>3. GOGGLES OR FACE SHIELD</p> <ul style="list-style-type: none">• Place over face and eyes and adjust to fit 	
<p>4. GLOVES</p> <ul style="list-style-type: none">• Extend to cover wrist of isolation gown 	
USE SAFE WORK PRACTICES TO PROTECT YOURSELF AND LIMIT THE SPREAD OF CONTAMINATION	

