Anxiety induced by hospitalization can be avoided if COVID-19 positives are permitted to take treatment at home. However, apart from norms prescribed for Home Isolation by Government of India vide reference cited (copy attached), certain additional guidelines are prescribed as given below:

1. Only Asymptotic COVID-19 positive patients can opt for home isolation. Even, if COVID positive has mild symptoms, he/she should be encouraged to stay in hospital.

2. The person should be below 50 years age and free from co-morbidities.

3. Before allowing person for home isolation following baseline investigations / medical examination shall be done:
   a. Complete Blood Picture
   b. Blood Urea/Blood Sugar
   c. Serum Creatinine
   d. Chest X-ray
   e. ECG
   f. LFT
   g. SPO2

4. If there is any abnormality found in the above tests, the Covid positive be admitted in the Covid Hospital.

5. The Place of stay identified as Home Isolation should be preferably, an independent house in a relatively non-crowded area.

6. The location of house should be well connected to reach out to a nearby COVID Hospital by Ambulance.

7. Persons living in apartments or with joint families living together are not permitted to go for home isolation.

8. The patient should not home-isolate in a house along with persons with more than 60 years or below 10-year-old children.

9. The family members of COVID Positive shall be strictly sensitized on DOs/DON'Ts on maintaining social distancing/sanitization of home etc.

10. The COVID positive shall live in a separate bedroom with attached toilet while other family members to have adequate rooms with separate toilets for them.

11. A caretaker/caregiver must necessarily monitor health condition of patient twice a day.
12. Family members must not physically come closer to the patient nor wash linen/utensils/making up the room / clean the toilet etc. Preferably, all these activities shall be done by patient himself in the isolated room.

13. The home-isolated person must be taught to use the video-calling facility to speak with doctors / local health caregivers who can monitor the patient on a continuous basis (24 X 7).

14. A medical officer shall be attached to a/group of home-isolated Covid positives to constantly monitor the health parameters and shift the patient in case any abnormality is expected.

15. **Home isolation shall end** for patients after laboratory testing, on 14th and 15th day from the day of first sample becomes negative through standard testing procedures.

Accordingly, all the Collectors, Superintendents of Government and Private COVID hospitals are hereby instructed to take necessary action.

SPECIAL CHIEF SECRETARY TO GOVERNMENT

Encl: GOI Guidelines on Home Isolation

To

1. All the Collector & District Magistrates
2. The Director, Medical Education
3. Commissioner, AP Vaidya Vidhan Parishad
4. Director, Health

Copy to

1. All the Joint Collector & Additional District Magistrates
2. All the DM&HOs / DCHSs in the State
Government of India
Ministry of Health & Family Welfare

Guidelines for Home Isolation of very mild/pre-symptomatic COVID-19 cases

1. Scope
The present guidelines are in addition to guidelines on appropriate management of suspect/confirmed case of COVID-19 issued by MoHFW on 7th April, 2020. All suspected (awaiting test results) and confirmed cases of COVID-19 disease are currently being isolated and managed in a hospital setting with the intent to break the chain of transmission.

As per existing guidelines, during the containment phase the patients should be clinically assigned as very mild/mild, moderate or severe and accordingly admitted to (i) COVID Care Center, (ii) Dedicated COVID Health Center or (iii) Dedicated COVID Hospital respectively. However, very mild/pre-symptomatic patients having the requisite facility at his/her residence for self-isolation will have the option for home isolation.

2. Eligibility for home isolation
   i. The person should be clinically assigned as a very mild case/ pre-symptomatic case by the treating medical officer.
   ii. Such cases should have the requisite facility at their residence for self-isolation and also for quarantining the family contacts.
   iii. A care giver should be available to provide care on 24 x 7 basis. A communication link between the caregiver and hospital is a prerequisite for the entire duration of home isolation.
   iv. The care giver and all close contacts of such cases should take Hydroxychloroquine prophylaxis as per protocol and as prescribed by the treating medical officer.
   v. Download Arogya Setu App on mobile (available at: https://www.mygov.in/aarogya-setu-app/) and it should remain active at all times (through Bluetooth and Wi-Fi)
   vi. The patient shall agree to monitor his health and regularly inform his health status to the District Surveillance Officer for further follow up by the surveillance teams.
   vii. The patient will fill in an undertaking on self-isolation (Annexure I) and shall follow home quarantine guidelines. Such individual shall be eligible for home isolation.
   viii. In addition to the guidelines on home-quarantine available at: https://www.mohfw.gov.in/pdf/Guidelinesforhomequarantine.pdf, the required instructions for the care giver and the patient as in Annexure II shall be also followed.

3. When to seek medical attention
Patient / Care giver will keep monitoring their health. Immediate medical attention must be sought if serious signs or symptoms develop. These could include
   (i) Difficulty in breathing,
   (ii) Persistent pain/pressure in the chest,
   (iii) Mental confusion or inability to arouse,
   (iv) Developing bluish discolorations of lips/face and
   (v) As advised by treating medical officer

4. When to discontinue home isolation
Patients under home isolation will end home isolation if symptoms are clinically resolved and the surveillance medical officer certifies him to be free of infection after laboratory testing
Undertaking on self-isolation

I .................................. S/W of ............................ resident of .................................................................................................................. being diagnosed as a confirmed/suspect case of COVID-19, do hereby voluntarily undertake to maintain strict self-isolation at all times for the prescribed period. During this period I shall monitor my health and those around me and interact with the assigned surveillance team/with the call center (1075), in case I suffer from any deteriorating symptoms or any of my close family contacts develops any symptoms consistent with COVID-19.

I have been explained in detail about the precautions that I need to follow while I am under self-isolation.

I am liable to be acted on under the prescribed law for any non-adherence to self-isolation protocol.

Signature________________________
Date____________________________
Contact Number__________________
Instructions for care-givers

- **Mask:** The caregiver should wear a triple layer medical mask appropriately when in the same room with the ill person. Front portion of the mask should not be touched or handled during use. If the mask gets wet or dirty with secretions, it must be changed immediately. Discard the mask after use and perform hand hygiene after disposal of the mask.
- **Hand hygiene** must be ensured following contact with ill person or his immediate environment.
- Hand hygiene should also be practiced before and after preparing food, before eating, after using the toilet, and whenever hands look dirty. Use soap and water for hand washing at least for 40 seconds. Alcohol-based hand rub can be used, if hands are not visibly soiled.
- After using soap and water, use of disposable paper towels to dry hands is desirable. If not available, use dedicated clean cloth towels and replace them when they become wet.
- **Exposure to patient:** Avoid direct contact with body fluids of the patient, particularly oral or respiratory secretions. Use disposable gloves while handling the patient. Perform hand hygiene before and after removing gloves.
- Avoid exposure to potentially contaminated items in his immediate environment (e.g. avoid sharing cigarettes, eating utensils, dishes, drinks, used towels or bed linen).
- Food must be provided to the patient in his room
- Utensils and dishes used by the patient should be cleaned with soap/detergent and water wearing gloves. The utensils and dishes may be re-used. Clean hands after taking off gloves or handling used items.
- **Use triple layer medical mask and disposable gloves** while cleaning or handling surfaces, clothing or linen used by the patient. Perform hand hygiene before and after removing gloves.
- The care giver will make sure that the patient follows the prescribed treatment.
- The care giver and all close contact will self-monitor their health with daily temperature monitoring and report promptly if they develop any symptom suggestive of COVID-19 (fever/cough/difficulty in breathing)

Instructions for the patient

- Patient should at all times use triple layer medical mask. Discard mask after 8 hours of use or earlier if they become wet or visibly soiled.
- Mask should be discarded only after disinfecting it with 1% Sodium Hypo-chlorite.
- Patient must stay in the identified room and away from other people in home, especially elderlies and those with co-morbid conditions like hypertension, cardiovascular disease, renal disease etc.
- Patient must take rest and drink lot of fluids to maintain adequate hydration
- Follow respiratory etiquettes all the time.
- Hands must be washed often with soap and water for at least 40 seconds or clean with alcohol based sanitizer.
- Don’t share personal items with other people.
- Clean surfaces in the room that are touched often (tabletops, door knobs, handles, etc) with 1% hypochlorite solution.
- The patient must strictly follow the physician’s instructions and medication advice.
- The patient will self-monitor his/her health with daily temperature monitoring and report promptly if develops any deterioration of symptom as detailed below.