Orders were issued through COVID Instant Order-35,36,52,54 regarding testing Strategies dealing with the suspected cases of COVID-19 from time to time. After opening up of economic activity post 1st June, 2020, it is felt necessary to revise guidelines issued earlier on Testing in Containment Clusters & Outside Containment Clusters. At this stage of pandemic, with ramped up testing capacities, testing strategy should be SMART and PURPOSEFUL.

**Twin fold objectives of testing:**

1. **Testing for reduction of Mortality:** We can Reduce mortality by testing the Persons in Hi-Risk categories, detecting positive cases early and treating them in Covid Hospitals giving atleast 7 days window period to the doctors.

2. **Testing for Community Surveillance:** This has been the approach so far and can Continue this with certain modifications. This enables to know the spread of infection in the post lockdown period and helps in avoiding major outbreak/major Clusters.

**1. Testing for reduction of Mortality:**

Target group is High Risk category Persons those who are above 60 years age and with co-morbidities like Diabetes, Blood Pressure, CKD, CHD, COPD and other ailments.

Line listing of above categories are available in MSS website.

**1a. High risk persons Within Containment clusters which are active/very active:**

1. 100% Screening of all persons of High Risk Group i.e., people who are having comorbidities.

2. Screening includes-Blood sugar testing, Checking for Blood pressure, SPO2, Temperature and checking for Covid symptoms like fever, cough, diarrhoea, loss of smell and taste, Sore throat and difficulty in breathing.

3. 100% covid testing of all persons above 60 years with Comorbidity in the high risk group. Persons with positive test result should be admitted in Hospital with in 24 hours of sample collection. There are about 70000 people in this category. At the rate of 10% coverage per day, testing of this category should be completed in 10 days time.

4. Distributing medicines for Diabetes and Blood Pressure for 15 days to persons with negative test result as per Comorbidity.

5. For persons below 60 years with Comorbidity, Screening as mentioned above for all and testing of persons with COVID like symptoms shall be done. No universal testing of this category. Medicines distribution has to happen for this category of people as per Co morbidity. There are 1.63 lakh persons in this category. Also about 6.13 lakh persons above 60 years without Co morbidity who needs to be screened.
1b. High risk persons Outside containment clusters:

1. 100% Screening of all persons of High Risk Group.
2. Screening includes-Blood sugar testing, Checking for Blood pressure, SPO2, Temperature and checking for COVID symptoms.
3. Distributing medicines for Diabetes and BP for 15 days to persons as per Comorbidity.
4. Testing for all Covid like symptomatic cases.
5. There are 48.67 lakh persons in this category outside containment zones.

In all 70,000 persons who are above 60 years with Comorbidity shall be tested in next 10 days. About 54.11 lakh need to be screened in next 15 days and all symptomatic cases to be tested.

1c. Other Symptomatic cases:-

For Persons with SARI, ILI and ARDS like symptoms admitted in both Private and Govt hospitals, suitable arrangement shall be made to test these categories on daily basis to avoid health personnel getting exposed to COVID 19 infection.

1d. Other Categories:

1. Cases coming through Pharmacy app / IMS System
2. Persons requesting for test through 104 call centre/Citizen app/Chatbot/IVRS/IMS.
3. Blue tooth Contacts of AarogyaSetu

2. Testing for Community Surveillance

As per the COVID Instant Order-54, all the other categories except 1,2,5 & 6 shall be tested without fail. Testing of remaining 11 categories will provide an idea about the spread of infection with in the district. In addition Pilgrims visiting all religious places, persons visiting Malls, Weekly Shandies (except Tribal areas) shall also be tested randomly.

Cluster containment & contact tracing

Containment measures of new clusters have to be taken up in a systematic manner.

- Contact tracing to be followed vigorously. There should be at least 10 to 15 primary contacts for each positive case in clusters and all of them shall be tested without fail.
- Instructions issued in COVID order 50 to be followed scrupulously.
- New teams shall be constituted drawing personnel from departments which haven’t been used so far to give rest to existing teams.
Proper documentation of contact tracing and test results of various samples is very important and non negotiable. Separate teams for this task may be constituted.

It is expected every day the following numbers to be tested at state level:

- Testing for mortality reduction
  - i. High Risk category - 7000
  - ii. Symptomatic cases - 4000
  - iii. Community surveillance - 2000
  - iv. Primary contacts - 2000

  **Total** - 15000

- In addition to above, Migrants coming from high incidence areas also to be tested without fail.

The above category of the people shall be tested invariably. In case district administration wants to test any other category they may do so with proper justification duly intimating the Government.

Spl. Chief Secretary to Govt.,

To
All the Collector & District Magistrates
All the DM&HOs in the State