राजस्थान सरकार
निदेशालय, चिकित्सा एवं स्वास्थ्य विभाग, राजस्थान, जयपुर

क्रमांक: आई.डी.एस.पी. / 2020 / 392

1. समस्त संयुक्त निदेशक, जोन,
2. समस्त मुख्य चिकित्सा एवं स्वास्थ्य अधिकारी,
3. समस्त प्रमुख चिकित्सा अधिकारी,
4. समस्त प्रधानाचार्य व नियंत्रक, मेडिकल कॉलेज, राजस्थान।

विषय:-राजस्थान सरकार द्वारा COVID-19 के संबंध में प्रदत्त एडवाइजरी अनुरूप कार्यवाही करवाने के क्रम में।

उपरोक्त विषयान्तर्गत लेख है कि राजस्थान सरकार द्वारा COVID-19 के संबंध में प्रदत्त एडवाइजरी संलग्न कर लेख है कि जारी की गई एडवाइजरी अनुरूप अविलम्ब कार्यवाही करवाया जाना सुनिश्चित करें।

संलग्न: उपरोक्तानुसार।

अतिरिक्त निदेशक (प्रावधान)
चिकित्सा एवं स्वास्थ्य सेवायें, राजस्थान, जयपुर

क्रमांक: आई.डी.एस.पी. / 2020 / 392

प्रतिलिपि सूचनार्थ एवं आवश्यक कार्यवाही हेतु प्रेषित–
1. विशेष उपलब्धि, माननीय मंत्री, चिकित्सा एवं स्वास्थ्य विभाग, राजस्थान सरकार, जयपुर।
2. निजी सचिव, अतिरिक्त मुख्य सचिव महोदय, चिकित्सा, स्वास्थ्य एवं परिवार कल्याण विभाग, राजस्थान।
3. निजी सचिव, प्रमुख शासन सचिव, चिकित्सा शिक्षा विभाग, राजस्थान।
4. निजी सचिव, मिशन निदेशक (एनएचएम), मुख्यालय।
5. निदेशक (जन स्वास्थ्य), मुख्यालय, जयपुर।
6. समस्त, जिला कलक्टर, राजस्थान।
7. सर्वर प्रम. नं. 302 ई-मेल तथा वेबसाइट पर अपलोड करने बाबत।
8. कार्यालय पत्रावली।

अतिरिक्त निदेशक (प्रावधान)
चिकित्सा एवं स्वास्थ्य सेवायें, राजस्थान, जयपुर
Government of Rajasthan
Medical Education Department

No. F.16 (12)Mf./Gr-I/2020
jaipur, dated 20th March, 2020

Principal & Controller,
Medical Colleges
Jaipur/Jodhpur/Udaipur/
Kota/Bikaner/Ajmer/Jhalawar
and Medical Colleges of RajMES

With a view to decide line of treatment for Corona patient, a core group of
following doctors is hereby constituted in SMS Medical College, Jaipur :-

1) Dr. Sudhir Bhandari, Sr. Professor in Medicine and PMC, Jaipur
2) Dr. Raman Sharma, Sr. Professor in Medicine
3) Dr. Prakash Keshwani, Sr. Professor in Medicine
4) Dr. S. Baverjee, Sr. Professor in Medicine.
5) Dr. Ajit Singh, Principal Specialist and Additional Superintendent

In case of any query regarding line of treatment and other treatment issued
related to Corona Virus, the information can be sent on following e-mails:

principalsmsmc@rajasthan.gov.in
officeprincipalsmsmc@gmail.com

The core group shall discuss and revert back to the concerned with its
expert advice.

(Vaibhav Galriya)
Secretary to the Govt.

Copy forwarded for information and necessary action i.e:
1) Additional Chief Secretary, Medical & Health Department.
2) Director (PH), Medical Heath Services, Rajasthan, Jaipur

[Signature]
Secretary to the Govt.
Advisory for Hospitals and Medical Education Institutions

The medical infrastructure in the country needs to be prepared for any possible influx of patients on account of COVID 19. In this context, the following interventions are proposed up to 31st March 2020. They will be reviewed as per the evolving situation.

Indoor Facilities:

1. Non-essential elective surgeries should be postponed.
2. Some beds should be set apart and prepared for creating isolation facilities in every public and private hospital.
3. All hospitals should mobilize additional resources including masks, gloves and personal protection equipment. Healthcare personnel should be trained for dealing with any foreseeable emergencies.
4. All doctors, nurses and support staff in different specialities, including pre and para clinical departments, should be mobilized and trained in infection prevention and control practices.
5. Hospitals must procure sufficient numbers of ventilators and high flow oxygen masks in preparation for future requirements.
6. All hospitals must ensure that they have adequate trained manpower and resource pools for ventilator/ ICU care.
7. Hospitals may ensure that stable patients are discharged as early as possible while further new admissions (of stable patients) are also restricted.
8. Number of patient attendants should be strictly restricted to ‘one’ only.

IEC Activities:

9. Patients must be educated about cough etiquette, Do’s and Don’ts, proper use of masks instead of using them indiscriminately and inefficiently; and personal hygiene. Hospitals should put up posters etc. to increase awareness amongst patients on Do’s and Don’ts regarding COVID 19.
10. Patients must be counselled against attaching any kind of stigma to Corona virus patients or to facilities where such patients are admitted. They must be made aware that
quick disclosure of symptoms and undergoing testing if advised is the surest way of battling COVID 19.

Administrative:

11. All hospitals should carry out a preparedness drill on Sunday, 22nd March 2020. Guidelines for this drill will be made available on the Health Ministry website.

12. Non-essential audits of hospitals by various regulators and accreditation agencies may be postponed.

13. All hospitals must provide treatment free of cost to any medical personnel who pick up infection while treating patients.

14. No suspected COVID 19 patient should be turned away from any hospital and the admission of any such patient should be notified to NCDC or IDSP immediately.

15. Similarly, all pneumonia patients must also be notified to NCDC or IDSP so that they can be tested for COVID 19.

16. Hospitals to ensure social distancing in their premises.

17. All ongoing examinations may be rescheduled after 31.03.2020.

18. All evaluation work may be rescheduled after 31.03.2020.

19. All Educational Institutions and Examination Boards are requested to maintain regular communication with the students and teachers through electronic means and keep them fully informed so that there is no anxiety amongst the students, teachers and parents.

20. Institutions are also requested to notify help-line numbers/e-mails which students can access for their queries.

21. All unauthorized shops (excluding pharmacies) and eateries in the vicinity of hospitals should be compulsorily shut.

22. Leave of all kinds (except under emergency and unavoidable circumstances) may be cancelled immediately.

OPD:

23. All patients may be advised not to come for routine visits to the OPD if it can be avoided or postponed.

24. OPDs may be organised in such a manner that patients exhibiting flu like symptoms are attended separately from other patients and spaced out so as to avoid overcrowding.
25. Patients suffering from chronic diseases and minor elements may be advised to utilise OPDs in primary/secondary care facilities rather than crowding tertiary care centres.

26. Pharmacy counters may be increased and queue management systems to be followed by engaging Indian Red Cross/NDRF volunteers.