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COMMISSIONERATE Health & Family Welfare Services

No:NVBDCP/Est7C/Covid 19/ 2020-21

Date: 9-12-2021

Circular

Subject: Discharge Policy - COVID-19 (Omicron) recovered persons from
Hospitals: Regarding

Reference: Proceedings of the 1st Meeting of State COVID 19 Clinical Expert
Committee, Dated: 08th Dec. 2021.

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With reference to the above subject, the Discharge policy of COVID-19 (Omicron variant) recovered persons from Hospitals as per the reference cited above is attached as annexure.

The District and BBMP Health Authorities are instructed to follow the discharge policy for the institutionally isolated COVID-19 (Omicron variant) patients untill further orders.

Any deviations from the above discharge protocol will be viewed seriously.

RLP 9.12.21
Commissioner

Department of Health & Family Welfare

To,

1. The Special Commissioner - Health , BBMP, Bengaluru.
2. The Deputy Commissioner, All Districts.
3. The Chief Executive Officer - Zilla Panchayath, All Districts.
4. The District Health and Family Welfare officer, All Districts.
5. The District Surveillance Officer, All Districts.

Copy for kind information to:

1. The Chief Secretary, GoK
2. The Chief Commissioner – BBMP, Bengaluru
3. The Principal Secretary, Dept of Health & Family Welfare, GoK
4. PS to Hon'ble Minister for HFW and Medical Education.

Annexure- Discharge policy

1. Mild cases

The patient can be discharged after 10days of symptom onset if the following criteria are met:

- No Fever and No Symptom/s for the last 3 consecutive days before discharge (without antipyretics)
- Maintains saturation above 95% for the last 4 consecutive days (without oxygen support)
- Resolution of clinical signs / symptoms (based on the report of investigations)
- Repeat inflammatory markers (S. Ferritin, S.LDH, D- Dimer & CRP) at the time of discharge. These should be in normal range/decreasing trend.
- **Patient shall be discharged only after 2 Negative RT-PCR reports 24 hours apart. If the report is positive, the swab test shall be repeated after 48 hours.**
- **At the time of discharge, the patient shall be advised to quarantine himself at home and self-monitor their health for further 7 days.**
- Following discharge from the hospital, the district surveillance officer (DSO) shall follow up these persons at their homes for their health status. They shall be followed up by the tele-monitoring team in the community and using the quarantine app.
- **At Home Quarantine RT-PCR is repeated at 6th day of Home Quarantine, if Negative can be released from Home Quarantine.**

- ** All patients advised home quarantine after discharge need to watch for onset of any new symptoms like fever, cough, breathlessness, chest pain, , weakness, etc. if any of these being found they are immediately advised to consult the doctor/physician. If there's no facility for home quarantine, institutional quarantine is advised*

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2. Moderate cases admitted to hospital

Moderate patients will be discharged after 10 days of symptom onset if the following criteria are met:

- No Fever and No Symptom/s for the last 3 consecutive days before discharge (without antipyretics)
- Maintains saturation above 95% for the last 4 consecutive days (without oxygen support)
- Resolution of breathlessness.
- Resolution of clinical signs / symptoms (based on the report of investigations)
- Repeat inflammatory markers (S. Ferritin, S.LDH, D- Dimer & CRP) at the time of discharge. These should be in normal range/decreasing trend.
- **Patient shall be discharged only after 2 Negative RT-PCR reports 24 hours apart.** If the report is positive, the swab test shall be repeated after 48 hours.
- **At the time of discharge, the patient shall be advised to quarantine himself at home and self-monitor their health for further 7 days.**
- Following discharge from the hospital, the district surveillance officer (DSO) shall follow up these persons at their homes for their health status. They shall be followed up by the tele-monitoring team in the community and using the quarantine app.
- **At Home Quarantine RT-PCR is repeated at 6th day of Home Quarantine, if negative can be released from Home Quarantine**

- **All patients advised home quarantine after discharge need to watch for onset of any new symptoms like fever, cough, breathlessness, chest pain, , weakness, etc. if any of these being found they are immediately advised to consult the doctor/physician. If there's no facility for home quarantine, institutional quarantine is advised*

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3. Severe Cases including Immunocompromised (HIV patients, transplant recipients, malignancy)- Discharge criteria for severe cases will be based on:

Patients shall be discharged after complete clinical recovery if following criteria are met:

- No Fever and No Symptom/s for the last 3 consecutive days before discharge (without antipyretics)
- Maintains saturation above 95% for the last 4 consecutive days (without oxygen support)
- Resolution of breathlessness.
- Resolution of clinical signs / symptoms (based on the report of investigations)
- Repeat inflammatory markers (S. Ferritin, S.LDH, D-Dimer & CRP) at the time of discharge. These should be in normal range/decreasing trend.
- **Patient tested Negative twice by RT-PCR 24hours apart 3 days after complete clinical recovery. If the report is positive, the swab test shall be repeated after 48 hours.**
- **At the time of discharge, the patient shall be advised to quarantine himself at home and self-monitor their health for further 7 days.**
- Following discharge from the hospital, the district surveillance officer (DSO) shall follow up these persons at their homes for their health status. They shall be followed up by the tele-monitoring team in the community and using the quarantine app.
- **At Home Quarantine RT-PCR is repeated at 6th day of Home Quarantine, if negative can be released from Home Quarantine**

**All patients advised home quarantine after discharge need to watch for onset of any new symptoms like fever, cough, breathlessness, chest pain, , weakness, etc. if any of these being found they are immediately advised to consult the doctor/physician. If there's no facility for home quarantine, institutional quarantine is advised.*

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