

# **Standard Operating Procedure & Handbook**

For

# COVID 19

Management

**<u>COVID 19 (OMICRON)</u>** <u>Management Protocol</u>

Policy / Procedure	SOP of COVID-19 Management M-Swasth Bengaluru	
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# **COVID-19 Mild disease**

• Laboratory confirmed Covid 19 patients / All asymptomatic patients / Co-morbid patients with no symptoms / Patients with mild symptoms (*Low fever, Dry cough, Anosmia, Ageusia, Weakness, Diarrhea, Myalgia*)

Advice for Mild Cases via Teleconsultation

# **Management Plan**

## Advice:

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- 1. Ensure adequate hydration and meal/nutrition intake.
- 2. Continue to follow all personal protective measures. Children above 2 years of age can use face mask.
- 3. Temperature monitoring 6 hourly in all (more frequent if having fever). Tepid sponging (tap water, not cold water) SOS.
- 4. Baseline saturation (SPO2) followed by repeat record after 6-minute walking. Consult if baseline saturation below 93% or fall in saturation of more than 5 % after 6 min walk. Monitor and record 6 hourly (or more frequent if having lower respiratory tract symptoms like fast breathing/indrawing of chest)
- 5. Gargles with Betadine gargles 6 hourly and steam inhalation with Karvol plus as tolerated twice daily (under supervision of parents).

# **Medications:**

- 1. Tab paracetamol 500 mg SOS if temperature >100F (can take every 4-6 hourly, maximum 4 doses in 24 hours). 10-15 mg/kg/dose for children
- 2. Tab Vitamin C 500 mg once daily x 2 weeks
- 3. Tab Zinc 50 mg once daily x 2 weeks (20 mg once a day for children)+ Multivitamins (Becosule Z, Zincovit, A to Z)
- 4. Tab levocetirizine 5 mg + montelukast 8 mg 1 tab once daily at night before sleep for 5 days if throat congestion (levocetirizine 2.5 mg + montelukast 4 mg or weight and age appropriate for children)
- 5. Calcirol sachet 60k once a day with milk or water for 3 days.
- 6. Nebulisation with Budecort respules (800 mg) twice daily.
- 7. Additional advice deemed appropriate for other associated symptoms such as
  - **a.** Cap Doxycycline (100mg) 1 tab twice a day for 5 days for cough & fever or Azithromycin (500mg) 1tab once a day for 5 days (**for secondary infection. Not for Omicron**)

- b. Tab pantoprazole (40mg) 1 tab once daily empty stomach for gastritis.
- c. Metronidazole (400mg) (1 tab thrice a day for 5 days for diarrheal manifestation) or prebiotic/probiotic sachet or capsule (Vibact or Vizylac)
- d. Grillinctus Cough Syrup 5ml 3 times a day for 5 days (any cough syrup)

## WARNING SIGNS IN ADULTS

- 1. Difficulty in breathing
- 2. Persistent fever / High grade fever / Recurrence of fever
- 3. Palpitation
- 4. Chest pain / Chest tightness
- 5. Severe Cough
- 6. Any new onset symptoms
- 7. SpO2 less than 93 % in room air
- 8. CRP > 5 times Normal
- 9. D Dimer > 2 times Normal

Above patients to be admitted to the Covid ward or the ICU at the earliest

### **Investigations:**

Lab tests on day 3-5 of illness (Repeat if done earlier):

1. RT – PCR, CBC with peripheral smear, CRP, D-Dimer, ECG, CBG, Serum Creatinine

\*\*Awake-proning: Following positions may be adapted in series, each for 30 mins – 2 hours

S No	Time duration	Position	
1	30 min to 2 hours	Lying on belly (Prone)	
2	30 min to 2 hours	Lying on right side (right lateral)	
3	30 min to 2 hours	Sitting up 60-90 degree (Fowler position) or Supine	Fowler's
4	30 min to 2 hours	Lying on left side (Left lateral)	
5	30 min to 2 hours	Back to position 1(prone)	

Duration of home isolation: 5 days from symptom onset and no fever for 3 days. Continue to use mask at home and outside for another 5 days.



## Advice for Moderate to Severe Cases via Teleconsultation

Patients with following comorbidities -

- Age 60+
- DM
- HTN / IHD
- COPD / Chronic Lung Disease
- Immuno- compromised state
- On immuno-suppressive drugs
- CKD
- Chronic Liver Disease
- Obesity

### Kindly refer to local/senior physician or visit the nearest hospital

# Pediatric COVID-19 related frequently asked questions (FAQs) by parents and care givers during coronavirus pandemic

# Q1. What measures can I take to prevent my child from having COVID-19 infection?

It can be a confusing time and it is okay to be worried for your children. Continue to take all personal protective measures like frequent hand washing or hand sanitization, wear a face mask covering your nose, avoid crowded places, cover your mouth and nose while coughing and sneezing, and eat healthy. Children above 2 years of age can also wear a mask.

### Q2. What should I do if a family member has come COVID-19 positive?

Do not panic. If a family member has tested coronavirus positive, then rest of the family members should also get themselves tested for COVID-19 and continue to take all personal protective measures for the next 10 days.

If the family member has been advised home isolation, then they can stay in a separate room (if possible) and wear a face mask at all times along with following other protective measures.

- Keep your children away from the COVID-19 positive patient. If your child is more than 2 years old and is cooperating, then they can also wear a mask.
- Make sure to wash their hands frequently, make them eat and drink well (home cooked food).
- Check their temperature frequently, watch for development of any symptoms, and visit a nearby doctor if required.

### Q3. Do all children need to be tested for COVID-19?

If your child is not having any flu-like symptoms after coming in close direct contact with a COVID-19 positive patient, then you should remain watchful for symptoms till 14 days from contact.

At any point within 14 days of contact, if the child develops symptoms like fever, cough, runny nose, vomiting, loose stools, etc. (described in detail below), then you should get them tested for coronavirus.

### Q4. What should I do if my child has symptoms of COVID-19?

Do not panic if your child is having flu-like symptoms (fever, cough, runny nose). It can be due to any other viral illness.

- If you have not already got your child tested for COVID-19, then get it donenow.
- Continue to follow personal protective measures for yourself and your child. Give them home cooked food and keep them well hydrated.
- Measure their temperature frequently. If it is more than 100-degree F, then you can do tepid sponging with tap water and give them syrup or tablet paracetamol.
- Paracetamol to be given as per the doctor's advice and discretion.
- You can also give nutritional supplements to your child.

AGE OF CHILD	SYRUP ZINC (20 mg/5 mL)
< 18 months	2.5 mL (10 mg) once daily for 14 days
>18 months	5 mL (20 mg) once daily for 14 days

- Other nutritional supplements like syrup multivitamin, drop vitamin D, calcium can be given as per their doctor's discretion.
- Be watchful for danger signs (explained below). If present, seek urgent medical advice at your nearest hospital.

### Q5. Do all children develop severe COVID-19 infection requiring admission in ICU?

Though we are still learning about coronavirus disease, most children are asymptomatic or develop mild flu-like symptoms which can be treated at home. But children who have been sick for a long time due to other illnesses (like lung diseases, cancer, heart disease, kidney disease etc.) have weak immunity and are at increased risk of developing severe COVID- 19 infection that may require ICU care.

### Q6. When should I admit my child to a hospital if he/she becomes COVID-19positive?

SIGNS AND SYMPTOMS	ACTIONS
If your child has: • Fever • Cough, runny nose • Vomiting, loose stools, stomach pain • Muscle or body pain • Redness of eyes, rash over body, neck swelling	<ul> <li>CONTINUE PROVIDING HOME BASED CARE TO YOURCHILD</li> <li>Do temperature charting</li> <li>Continue taking personal protective measures</li> <li>In case of fever, you can do tepid sponging and give syrup/tablet paracetamol</li> <li>Be watchful for danger signs</li> </ul>
If your child has: • Babies up to 1 year of age with temp >102-degree F • Fever >100-degree F for more than 3 days • Fast breathing	VISIT YOUR NEARBY DOCTOR AS SOON AS POSSIBLE • Continue to follow other suggestions as advised above.
<ul> <li>If your child has ANY of the following signs/symptoms:</li> <li>Indrawing of chest</li> <li>Looks pale or blue</li> <li>Peripheries feel cold</li> <li>Sunken eyeballs and dry mouth</li> <li>Not passed urine for more than 3- 4 hours (for children less than 5 years of age)</li> <li>Refusing to feed</li> <li>Looks drowsy or lethargic</li> <li>Abnormal body movement</li> </ul>	<ul> <li>YOUR CHILD NEEDS URGENT HELP, RUSH TO THE NEARESTHOSPITAL</li> <li>Keep the child warm.</li> <li>If the child is drowsy or is having abnormal body movements, keep them turned to their left side.</li> </ul>

## \*Adapted from –

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Royal College of Pediatrics and Child Health (RCPCH) advice for parents during coronavirus, MoHFW Guidelines & MoHFW (WB Govt.)

#### RT PCR report CT (Cycle Threshold): In value, RT PCR report Ct (cycle threshold) is evaluated to understand the viral load and infectiousness. Lower the value higher is the viral load

Score	Viral load
17-24	High viral load
24-35	Moderate viral load
>35	Mild viral load

### **HRCT Chest**

СТ	Sev	eri	ty	Sco	re	
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Score	CT severity	
< 8	Mild	
9-15	Moderate	
> 15	Severe	

CO-RADS score: Level of suspicion for COVID-19	
CO-RADS 1	No
CO-RADS 2	Low
CO-RADS 3	Intermediate
CO-RADS 4	High
CO-RADS 5	Very high
CO-RADS 6	Very high with PCR+

CRP (mg/dl)	Severity of inflammation
0-6	Normal
<26	Mild
26-100	Moderate
>100	Severe

IL6 (pg/ml)	Severity of inflammation
0-7	Normal
<15	Mild
15-100	Moderate
100-500	Severe
>500	Critical

D dimer (Micro gram/ml)	Severity of inflammation
<0.5	Normal
<1	Mild
>1	Moderate-severe

IF D dimer measured in ng/ml then multiply above reading by 1000

Neutrophil to Lymphocyte ration (NLR) <3.5 –Mild

>3.5- Moderate-severe

	Normal range
Ferritin	13-150 ng/ml
LDH	0-250 U/L
ESR	0-22 mm/ hour

### **Antibody Tests**

- Specific: SARS COV2 Anti Spike Protein Antibody Test-<u>15</u> required for protection
- 2) General: SARS COV2 IgG Antibody Test