

CORONA VIRUS DISEASE (COVID-19) AND POST COVID PRECAUTIONS

Nomenclature:

CO – CORONA

VI – VIRUS

D – DISEASE

19 – 2019

COVID-19 is linked to viruses which cause Severe Acute Respiratory Syndrome (SARS) and Middle Eastern Respiratory Syndrome (MERS). The common cold (229E) is also caused by a Corona virus.

Appearance

The virus has a crown like thorny appearance on the surface, hence the name Corona Virus.

Mode of Spread

Droplet infection – coughing, sneezing, talking, touching surfaces infected with droplets.

Statistics (as on 11.01.2021)

Places	Cases	Death
World	9.0702906 Crores	19 Lakhs
India	1.0467431 Crores	1.5 Lakhs
Tamilnadu	8.26 Lakhs	12,215
Kalpakkam	569	17

- Case fatality rate is 1.4
- Daily count of positive cases less than 700
- Number of positive cases of New UK Strain in Tamilnadu: 90

Symptoms

- Fever, Chills
- Cough, sneezing
- Loss of smell, taste
- Breathing difficulty
- Loose stools, Vomiting
- Tiredness, Myalgia
- Red eye
- Headache

Co-morbidities which can contribute to severity of COVID infection and complications

- Heart Disease
- Cancer
- Immunodeficiency states
- Obesity
- Smoking
- Asthma

- Type 2 Diabetes Mellitus
- Chronic Kidney Disease
- Pregnancy

Case Profile

- Takes 1-4 days for symptoms to appear
- Disease transmission - 2 weeks – 1 month
- Complications usually set in after 4 to 5 days and persist for even months after recovery.

Mode of Action

- The S. Protein in the virus binds to ACE 2 receptors in various organs, commonly in the lungs.
- Children have less infection rate and severity due to decreased number of receptors.

What to look for

- Temperature, Pulse, BP
- Respiratory Rate
- Oxygen Saturation [Spo2 < 95 – Significant]
- SPo2 < 90 – may require hospitalization
- Takes 1-4 days for symptoms
- Disease transmission 2 weeks – 1 month

Complications

- Lung injury - Pneumonia
- Effusion [Fluid collection in the lungs]
- Heart Muscle weakness
- Liver, Pancreas- inflammation
- Brain - Stroke
- Clot formation

Post COVID Complications

Short term

- Breathlessness
- Myalgia
- Fatigue
- Anxiety

Long Term

- Respiratory - Altered PFT [Lung function Tests]
- Skin - Rash, Alopecia[Hair loss]
- Neurological - Olfactory and Gustatory [loss of smell and taste]
- Altered Cognition
- Memory Issues
- Psychiatry – Depression, Anxiety, Mood changes
- CVS – Myocardial inflammation and Ventricular dysfunction
- Fungal Infection
- Super added infection

Precautions

- Mechanical - Mask / Face shield
- Hand wash
- Avoid touching face
- Sanitization
- Health care workers -PPE/Face Shield / Gloves/ Cap

POST COVID PRECAUTIONS AND SAFE PRACTICES AT HOME

- Hydration – plenty of warm water and home based fluids
- Immune boosters / Vitamins
- Rest – absolutely essential with slow return to regular activities
- Yoga / Meditation
- ***Visit to post covid clinic is mandatory***
- Do not ignore even mild symptoms
- Regular check up for already existing health problems
- Continue regular medicines without fail.

Schools

Suggested precautions for re opening of schools

- Staggered timings
- One desk – One student
- Partitions between desks
- Repurposing large areas like halls / auditorium
- Split scheduling / blended learning
- Alternate between real time / virtual learning
- Social distancing

Transport

- Primary sections – Parent pickup and drop
- Increased number of buses/ trips –one student per seat
- Regular screening of drivers
- Sanitation of buses

Sanitization and disease control measures

- Hand wash, sanitiser dispensers
- Sanitation of premises
- Safe disposal of waste
- Regular screening of staff
- Compulsory mask
- Screening at entrance of school - Body temperature

COVID VACCINE STATUS -INDIA

- NEGVAC - [National Expert Group on Vaccine Administration for COVID (established on 7th Aug 2020)
- 8 vaccines in the pipeline
- 2 ready for use

- 2 doses at 28 days interval
- Brands are not interchangeable
- Storage- 2-8 degrees C

Proposed vaccine schedules in India

- Phase – I - 30 crore population
- Health care workers (hospital staff) – 1 Cr
- Front line workers (armed forces, security services, home guard, police etc.,) – 2 Cr
- Public - prioritised more than 50 [as on 1.1.2021] and < 50 with comorbidities26 cr.

ROLE OF MEDICAL SERVICES GROUP DURING COVID PANDEMIC

COVID MANAGEMENT AT DAE HOSPITAL KALPAKKAM AND ANUPURAM

COVID CONTAINMENT STRATEGIES:

1. Identification of high risk clusters and fever screening camps – CISF / Contract Workers / Civil Contractors
2. Sanitization of crowded areas
3. Opening of 4 Facility quarantine centres for primary contacts
4. COVID Care Centre
5. Distribution of immunity boosting medicines as per Government guidelines
6. Hospital Sanitisation as per guidelines

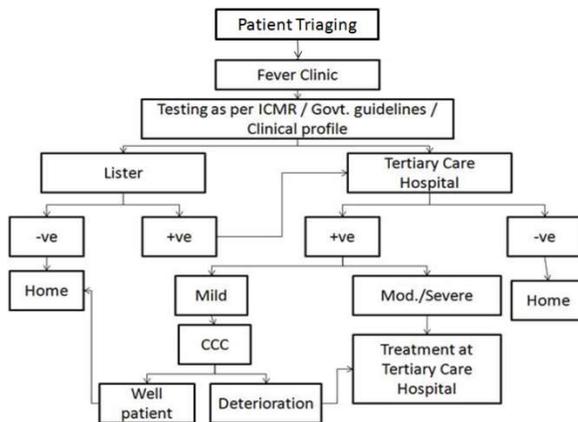


Covid Care Centre (CCC)



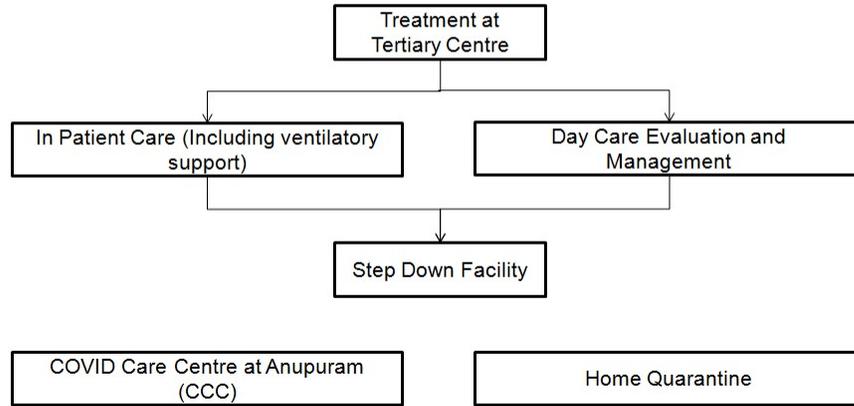
Sanitisation

COVID MANAGEMENT AT DAE HOSPITAL KALPAKKAM AND ANUPURAM



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COVID MANAGEMENT STRATEGIES:



COVID MANAGEMENT AT DAE HOSPITAL KALPAKKAM AND ANUPURAM



Triage



Fever clinic



Testing Facility



Screening Camp

All the above activities were carried out under the guidance of Director (IGCAR/GSO), Director (MG), AD (MG) and various unit heads with the yeoman support from administrative services as well as other units of GSO and Unit co-ordinators and volunteers.