



# Suraksha

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During  **COVID-19**  
For Gynaecologists

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## MODULE 1

**Medical guidelines for gynecologists to  
keep themselves & staff safe:  
Pre OPD & Post OPD precautions**

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# Precautions for healthcare professionals

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## Precautions for healthcare professionals: *Why is it necessary?*

Healthcare professionals are at high risk of getting infected with COVID-19 as they come in contact with large numbers of patients, close contacts and procedures where there is spray/aerosolization (resuscitation, ventilation) or a splash of body fluids (labor, delivery, surgical procedures).

Hence, it is important for them to take universal precautions and make use of proper PPE. The rapid spread of infection is observed from an infected patient to the healthcare provider and then onward spread to more patients and in a large number of populations.

Evidence suggests that thorough and adequate use of PPE and other protective measures decrease the spread of infection among healthcare professionals.

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# Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

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## Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

1. Sanitize hospital / clinic prior to starting OPD .Floors, walls and all object surfaces should be wiped with disinfectant ( 1% Sodium hypochlorite) at least 2-3 times in a day.
2. Remove all non - essential equipment from OPD to facilitate cleaning and disinfection and reduce risk of fomite related spread.
3. Avoid use of air- conditioners. Use exhaust fans and keep windows and doors open.
4. Travel to medical facility by private vehicle. Avoid use of public transport.
5. Keep a separate pair of clothes meant for use in OPD use only. Using washable /disposable impermeable gown over your routine clothing is a good and safe alternative.

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## Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

6. All staff including doctors, receptionist ,sisters, attendants to wear triple layer mask , head cover, face shield and gloves (Appropriate PPE as per exposure risk)
7. Avoid wearing ornaments and accessories like wrist watches, earphones etc to prevent fomite related spread. Minimize use of mobile phones, purses, wallets, keys etc and sanitize them often.
8. Minimum handling of all medical records brought by patient. Sanitization of all medical equipment like stethoscope

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## Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

9. All staff including doctors, receptionist ,sisters, attendants to wear triple layer mask , head cover, face shield and gloves (Appropriate PPE as per exposure risk)
10. Avoid wearing ornaments and accessories like wrist watches, earphones etc. to prevent fomite related spread. Minimize use of mobile phones, purses, wallets, keys etc. and sanitize them often.
11. Minimum handling of all medical records brought by patient. Sanitization of all medical equipment like stethoscope, BP apparatus, pulse oximeter, fetal heart Doppler probe, ultrasound probe etc. after each use.

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## Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

12. Minimize overcrowding and exposure in OPD by following measures

- a) Limiting ANC visits to minimum essential ( 12-13 weeks for NT scan, 18- 20 weeks for anomaly scan and then at 30-32 wks if no risk factors). No separate visits for vaccination.
- b) Properly spaced and prior appointments to patients.
- c) Telephonic consultations and prescribing medication for minor ailments.
- d) Use of communication media for follow up investigations like ultrasound and blood reports.

13. Every patient and accompanying person to wear face mask .They should wash hands with soap and water for 20 seconds /sanitize using alcohol based hand rub .They should remove footwear outside the clinic . Preferably sanitize hands again before entering doctor's cabin.

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## Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

14. COVID screening with checklist at reception counter. Those with history of fever or respiratory symptoms, history of travel from containment areas, history of close contact with COVID positive patient should be triaged at entry point. Appropriate authority to be informed and patient to be sent to referral centers for COVID testing.
15. Basic parameters like pulse, BP, weight to be recorded and purpose of visit should be noted to reduce contact time in doctor's cabin. Pulse oximeter if available is beneficial.
16. Social distancing: One meter distance to be maintained at all times for hospital staff as well as in waiting area.

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## Pre-OPD / Post-OPD precautions for small nursing homes/ single doctor clinics

17. Respiratory hygiene to be followed by all. Coughing or sneezing against your arm with elbow bent so as to minimize spread of droplet infection.
18. Avoid touching MEN (Mouth Ear Nose) with hands at all times.
19. At the end of OPD sanitize all equipments and surfaces in use.
20. Before leaving hospital discard gown / change hospital clothes. Sanitize all personal belongings before carrying them home.

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# Additional precautions for staff working at Institutions / Tertiary care centers

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## Additional precautions for staff working at Institutions / Tertiary care centers

21. Considering the workload and travel restrictions during lockdown, doctors and paramedical staff can be divided in batches so as to reduce exposure to COVID
22. Outstation staff or those having homes in containment areas to be provided in house facilities for stay especially during lockdown period.
23. Dedicated area in OPD for COVID screening with checklist and triage before physical examination in OBGY OPD.

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# RESCUE measures

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## Additional precautions for staff working at Institutions / Tertiary care centers

- R** R: Rest to staff over the age of 60 years and those having co-morbidities like (diabetes, hypertension, obesity, heart and respiratory disease) and those who are pregnant. They should preferably be given leave with pay or allotted non- contact duties to whatever extent is feasible.
- E** E: Ensure Arogya Setu app to be downloaded by all and put on for your and patient safety.
- S** S: Self -quarantine for staff as per guidelines if in contact with COVID positive patient's - Chemophylaxis with hydroxychloroquine for all medical personnel in high risk category.
- U** U: Universal precautions for prevention of COVID spread.
- E** E: Education of staff and patients visiting clinic regarding preventive measures for reducing COVID spread

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## Note:

For surface cleaning and disinfection, agents that are useful are alcohol or chlorine based. Alcohol based agents should contain 70% isopropyl alcohol. Chlorine based solutions are prepared by diluting liquid chlorine (1000 mg/L strength) or freshly prepared 1% sodium hypochlorite solution.

The appropriate concentration of sodium hypochlorite for disinfecting general liquid biological waste is approximately 1%. Household bleach is 5 - 6 % sodium hypochlorite; therefore a 1:5 (v/v) dilution of bleach to liquid biological waste is appropriate.

The contact time of these solutions should be at least 30 minutes.

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