



**GOVERNMENT OF KARNATAKA**

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Karnataka Government Secretariat

Vikasa Soudha

Bengaluru, Dated:22.05.2021

**CIRCULAR**

Sub: Protocol for COVID-19 positive patients presenting to triage area

Ref: Proceedings of the clinical expert committee meeting of RGUHS, conducted through circulation (dated. 20/05/2021)

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The physical triage shall be in a health center/ hospital/ a suitable facility in the ward/ village / home etc. and done by a team of qualified and competent medical and health professionals that shall include MBBS AYUSH / PG residents/ interns/ others. The person who has tested positive for COVID-19 presenting to triage area. The following protocol shall be used for allowing a person in triage area or shifting the person to CCC, DCHC or DCH and as given below:

**PROTOCOL FOR COVID POSITIVE PATIENTS PRESENTING TO TRIAGE AREA**

COVID19 Positive Patient at Triage					
Assessment of the Patient Symptoms and Signs, including all Vitals Enquire about co-morbidities of the Patient, Ongoing Medications/treatment.					
SpO2 >94% with Room air			SpO2 <94% with Room air		
Asymptomatic	Mild Symptoms	With Comorbidities	Pneumonia		Sepsis/Septic Shock /MODS
A	B	C	D	E	F
HOMEISOLATION/CCC			Wards	HD U	ICU

To all Patients who are breathless /hypoxic (Oxygen Saturation <94%) should receive the following irrespective of RTPCR status.

- Start Oxygen according to the need.
- Inj. Low Molecular Weight Heparin 40 mcg S/C stat.
- Inj. Methyl prednisolone 40mg IV start /Inj.Dexamethasone6mg IV Stat
- If Possible, CARP (COVID Awake Repositioning Prone) protocol to be initiated.

- ☐ All Blood sampling (COVID-19panel) should be done at the triage area itself and sent to the laboratory, for all the patients. Once Patient stabilizes, Chest X-ray and HRCT Thorax can be planned.
- ☐ ECG and GRBS should be done for all the patients at the triage area.
- ☐ It is the duty of the doctor and nurse to make sure the oxygen and all the treatment at the triage area, has been given appropriately for the patient, before the patient is shifted to the designated hospital(Wards/HDU/ICU).

Each patient should be shifted to the wards according to his Oxygen requirement (as per Govt. of Karnataka Circular HFW/134/ACS/2021 dated 03/05/2021 on Sub: "Guide lines for Rational use of Oxygen in COVID19 Hospitals".)

1. **Zone -- A:** Ward or Floor for patients who do not require Oxygen (e.g., patients maintaining Oxygen saturation 94% or above in room air) (Home Isolation: A/B)
2. **Zone- B1:**Wardor Floor for patients who require Oxygen at 1 to 5 Litres per minute (CCC)
3. **Zone- B2:**ward or Floor for patients who require Oxygen at } to 10 Litres per minute
4. **Zone-C:** Ward or floor for patients who require Oxygen at 1. } to 15 Litres per minute  
Hospital Based Management
5. **Zone-D:** Ward or floor for patients who require Oxygen at > 15 Litres per minute

Further treatment should be according to the "**Management Protocol for COVID-19, A Point of care approach, Version4.0**

- Ideally triage should have one entry point, manned by adequate security personnel for the smooth management of patient inflow.
- Adequate area to receive the patient from the Ambulances, manned by sufficient support staff in clouding a minimum of 1 Nursing staff and 1 group D worker, specifically for shifting of patient from Ambulance, into the Triage bed.
- Patients can be kept in trolleys until he /she is shifted to designated place.
- Triage area should have a minimum of 5-10 Doctors, Interns. All doctors other than from Pulmonary Medicine, General Medicine, and Anaesthesia can be roped into the triage area, such as Radiologists and others.
- Sufficient numbers of Wheel Chairs and Trolleys should be made available at the centre.
- Proper waiting area should be present for the next patient to be triaged

  
(JAWAID AKHTAR)

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**Copy to:**

1. The Chief Commissioner, BBMP
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