Patient Kit

Home Monitoring or Isolation Facility





What to expect from the program

The Community Health Worker will provide a patient kit and give instructions to the patient and caregiver to help them provide care safely until the isolation period ends.

A patient kit usually contains:

- Thermometer
- Pulse oximeter
- Masks
- Soaps or Sanitizer
- Gloves
- Paracetamol for fever and pain and other cough medications
- A printed sheet to document the patient's vital signs during the illness.
 This is the information that will either be assessed by the community health worker on home visits or that needs to be relayed to the community health worker, as advised by telephone or WhatsApp message.



The Community Health worker will

- 1. Instruct the patient and caregiver about the contents of the patient home monitoring kit, how to use the equipment, and record vital signs.
- 2. Instruct the patient and caregiver about the duration of symptoms and warning signs to watch for.
- 3. Instruct the patient and caregiver about prescribed medications and how they are to be used.
- 4. Instruct the patient and caregiver about isolation, infection control, mask & glove use, sanitisation of surfaces at home, and waste disposal.
- 5. Counsel the patient and caregiver regarding the usual clinical course of asymptomatic/mild disease. Counsel the patient and caregiver regarding the usual clinical course of asymptomatic/mild disease, diet, hydration, and activity.
- 6. Provide psycho-social /mental health support to the patient and caregiver to allay their anxiety and fear.
- 7. Instruct them regarding the duration of isolation required.
- 8. Check on the patient via phone or in person at least once (or twice) daily and obtain the home monitoring record.
- 9. Inform and refer to the treating doctor, initiate processes for transport to COVID-19 oxygen facility in case of warning signs.
- 10. Check on patients who have been discharged home from COVID-19 isolation/oxygen facilities or higher centres of treatment.
- 11. Follow-up to ensure completion of vaccination schedule for those eligible for the vaccine.

What to do when home

Suspected or Newly diagnosed COVID-19

Our community health worker will follow you though the course of your illness, while you are at home or in home isolation.

Most patients with a COVID-19 infection will have no symptoms or mild symptoms, and it is safe for you to be at home. The goal of this home monitoring program is to watch you closely so that we can pick up any warning signs that suggest that you may need additional treatment.

NOTE: Starting treatment early – like steroids – will actually harm you, and not protect you. There is a correct time and dose for all interventions.

Measure your oxygen saturation, pulse rate, and if possible, temperature three or four times daily - preferably morning, afternoon, evening and night, or at least two readings (morning and night).

The community health worker will call you in the morning and evening every day – please communicate these readings to them as per your agreement with them – via phone, or via a photograph if you have Whatsapp, or in person, if they come home to visit you to help you with the recordings.

If they detect any warning signs, they will advise you on how to get transferred to a facility that can provide oxygen. Most patients will not require this.

Things to do

- 1. Learn to operate and use the pulse-oximeter and thermometer.
- 2. Learn to record your vital signs and communicate them properly to the community worker.
- 3. Learn the trigger / warning signs, and know what number to call in case you see any of these signs: persistent high-grade fever, breathlessness, drop in oxygen saturation, inability to take any liquids or food orally, confusion or dizziness.
- 4. Isolate the affected family member in a separate room (or elsewhere on your land or compound: preferably a well-ventilated room with a window that can be kept open safely).



- 5. Designate one responsible family member as a caregiver to the affected person. The designated caregiver should maintain a distance of 1 metre from the patient, if the living situation allows.
- 6. The designated caregiver should monitor and record the temperature, pulse and oxygen saturation of the patient as advised by the community health worker and administer medications for symptomatic relief as advised. Continue all regular medicines for chronic health conditions. **Do not self-medicate or mix medications from different sources.**
- 7. Have a plan in place for the possibility of the caregiver or more family members getting a COVID-19 infection.
- 8. Triple-ply single-use surgical masks are advised for the patient. If these are not available, then a clean reusable triple-layer cloth mask can be used. Instruct each family member to wear a mask indoors as well.
- 9. Serve meals to the affected person separately. Wash all utensils well with soap and water.
- 10. Ensure adequate fluid intake and wholesome nutritious food.
- 11. Encourage the patient to stay active and mobile as energy permits and change positions frequently even when resting.
- 12. Assume all family members are infected as well, especially if they have symptoms. If they have symptoms, they should also be enrolled in the home monitoring program.
- 13. Inform neighbours and community leaders, so as to enlist their support in ensuring provision of food and other essential supplies to the family in isolation.

14. Follow all infection control, sanitisation, waste disposal and caregiver safety protocols as advised by the community health

A suspected COVID-19 patient who cannot be observed or monitored at frequent regular intervals throughout the day by a caregiver should not be advised home isolation, but should be referred to a COVID-19 isolation facility.

Once isolation period ends:

- 1. Follow diet and activity as advised by the treating doctor on discharge, with attention to energy conservation and pacing for a gradual return to full activity. Administer medications prescribed on discharge and take the patient for follow-up as advised by the doctor.
- 2. If the patient has any new or recurrent symptoms, seek immediate medical attention.
- 3. Check regarding eligibility, and schedule a date for COVID-19 vaccination.



COVID-19 Danger Signs

- 1. Difficulty in breathing/Shortness of breath
- 2. Bluish lips or face
- 3. Gasping for air when speaking
- 4. Coughing up blood
- 5. Pain/pressure in chest
- 6. Altered mental status (e.g. confused or severe sleepiness)
- 7. Inability to eat/drink or walk
- 8. Any other significant change in condition

If you notice that the patient is developing any of these signs, please immediately call the help line number provided, or arrange transfer to a preselected hospital.

Source: Covidprotocols.org







Mental health: Patients

In patients who have had COVID-19, there may be an increased risk of mental illness.

Patients who recover from COVID-19 have an increased risk anxiety, depression, or psychosis, even if they did not have a history of these before, for 6 months after their illness.

We don't know whether this is because of an effect of the virus on the brain, or because of the stress, guilt, or other psychological implications of being sick with COVID-19

It is important for patients to have access to mental health resources to help them through anxiety, depression, or psychosis if they occur.

It is also important for their families to be aware of their increased risk.

Patients expressing suicidal or homicidal thoughts or thoughts of self-harm should immediately be referred to:

Reference:

Taquet, Maxime & Luciano, Sierra & Geddes, John & Harrison, Paul. (2020). Bidirectional associations between COVID-19 and psychiatric disorder: retrospective cohort studies of 62 354 COVID-19 cases in the USA. The Lancet Psychiatry. 8. 10.1016/S2215-0366(20)30462-4.





Post COVID-19 information sheet for patients to prevent Mucormycosis

What is it?

Mucormycosis or black fungus is a rapidly spreading fungal infection involving the sinuses, eyes, and central nervous system. If detected and treated on time we can prevent loss of vision, loss of the eye and eventually, loss of life.

Who can get it?

- Patients with Diabetes Mellites, raised blood sugars
- Patients on long term steroids (unproven)
- Other associated comorbidities like cancer, recipient of organ transplant, history of neutropenia

Signs & Symptoms

- Facial pain
- Localized headache
- Stuffy nose
- Decreased vision
- Bloody nasal discharge
- Dental pain or loose teeth
- Facial swelling or swelling around the eyes
- Drooping of eyelid, bulging of eyes
- Ulcers on the palate

Dos

- Control blood sugars.
- Immediately report if there are any of the above symptoms
- Follow the taper of oral steroids as advised by a doctor.

Donts

- Don't ignore minor symptoms.
- Don't try home remedies for management.

Time is very important in the course of disease, vision and life loss can happen rapidly.

