



GUIDELINES FOR HOME ISOLATION OF MILD/ASYMPTOMATIC COVID-19 CASES

(Published January 2022)



MEDANTA 24x7 COVID HELPLINE
☎ 0124 4834 597 📞 'Hi' on 70114 14141

WHO IS AN ASYMPTOMATIC/MILD CASE OF COVID-19?



Asymptomatic cases are laboratory confirmed cases who are not experiencing any symptoms and have oxygen saturation at room air of **more than 93%**.

Clinically assigned mild cases are patients with upper respiratory tract symptoms with or without fever, without shortness of breath and having oxygen saturation at room air of **more than 93%**.

PATIENTS ELIGIBLE FOR HOME ISOLATION



The patient should be clinically assigned as mild/asymptomatic case by the treating doctor.



Such cases should have the requisite facility at their residence for self-isolation and for quarantining the family contacts.



A caregiver (*ideally someone who has completed his COVID-19 vaccination schedule*) should be available to provide care on 24x7 basis.



Elderly patients aged more than 60 years and those with co-morbid conditions such as hypertension, diabetes, heart disease, chronic lung/liver/kidney disease, cerebro-vascular disease etc., should only home isolate after proper evaluation by the treating doctor.



Patients suffering from immune compromised status (HIV, transplant recipients, cancer therapy etc.) are not recommended for home isolation and should only be allowed home isolation after proper evaluation by their treating doctor.



INSTRUCTIONS FOR THE PATIENT



Patient must isolate him/herself from other household members, stay in the identified room and away from other people at home.



Patient should stay in a well-ventilated room with cross ventilation and windows should be kept open to allow fresh air to come in.



Patient should at all times use triple layer medical mask. They should discard mask after 8 hours of use or earlier if the mask becomes wet or is visibly soiled. In the event of caregiver entering the room, both caregiver and patient may preferably consider using N-95 mask.



Masks should be discarded after cutting them to pieces and putting in a paper bag for a minimum of 72 hours.



Patient must rest and drink lot of fluids to maintain adequate hydration.



Follow respiratory etiquette at all times.



Undertake frequent hand washing with soap and water for at least 40 seconds or clean with alcohol-based sanitizer.



Patient should not share personal items including utensils with other people in the household.



Clean frequently touched surfaces in the room (tabletops, doorknobs, handles, etc.) with soap/detergent and water.



Patient should self-monitor his/her health with daily temperature and oxygen monitoring (as given below) and report promptly if any deterioration of symptom is noticed.

Self-health Monitoring Chart

Date and time	Temperature	Heart rate (from pulse oximeter)	SpO2 % (from pulse oximeter)	Feeling (better /same/worse)	Breathing (better /same/worse)

Monitor your health for 7 Days using this chart.

Self monitoring of SpO2%



For self-monitoring blood oxygen saturation with a pulse oximeter, place the index finger (after cleaning hands and removing nail polish, if any) in the pulse oximeter probe and take the highest steady reading after a few seconds.

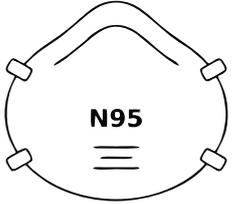
Self monitoring of respiratory rate

The patient may self-monitor breathing rate/respiratory rate in sitting position, breathe normally and count the number of breaths taken in 1 full minute.



INSTRUCTIONS FOR CARE GIVER

Mask



- The caregiver should wear a triple layer medical mask. N95 mask may be considered when in the same room with the patient.
- Front portion of the mask should not be touched during use.
- If the mask gets wet or dirty with secretions, it must be changed immediately.
- Masks should be discarded after cutting them to pieces and putting in a paper bag for a minimum of 72 hours.
- Perform hand hygiene after disposal of the mask.
- He/she should avoid touching own face, nose or mouth.

Hand hygiene



- Hand hygiene must be ensured following contact with the patient or his/her immediate environment.
- Use soap and water for hand washing at least for 40 seconds. Alcohol-based hand rub can be used, if hands are not visibly soiled.
- After using soap and water, use of disposable paper towels to dry hands is desirable. If not available, use dedicated clean cloth towels and replace them when they become wet.
- Perform hand hygiene before and after removing gloves.

Exposure to patient/patient's environment



- Avoid direct contact with body fluids (respiratory, oral secretions including saliva) of the patient.
- Avoid exposure to potentially contaminated items in patient's immediate environment (e.g. avoid sharing eating utensils, dishes, drinks, used towels or bed linen).
- Food must be provided to the patient in their room. Utensils and dishes used by the patient should be cleaned with soap/detergent and water while wearing gloves. The utensils may be re-used after proper cleaning.
- Clean hands after taking off gloves or handling used items. Use triple layer medical mask and disposable gloves while cleaning or handling surfaces, clothing or linen used by the patient.
- Perform hand hygiene before and after removing gloves.

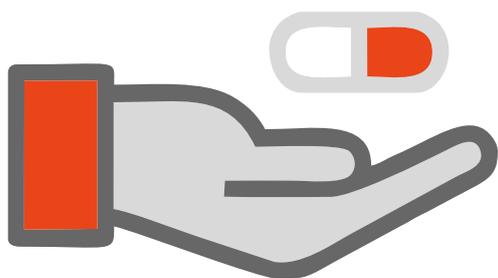
Biomedical waste disposal

General waste should be collected in bags securely tied for handing over to waste collectors.

Used masks, gloves and tissues or swabs contaminated with blood/body fluids of COVID-19 patients, including used syringes, medicines, etc., should be treated as biomedical waste and disposed off accordingly by collecting the same in a yellow bag and handed over to waste collector separately.



TREATMENT FOR PATIENTS IN HOME ISOLATION

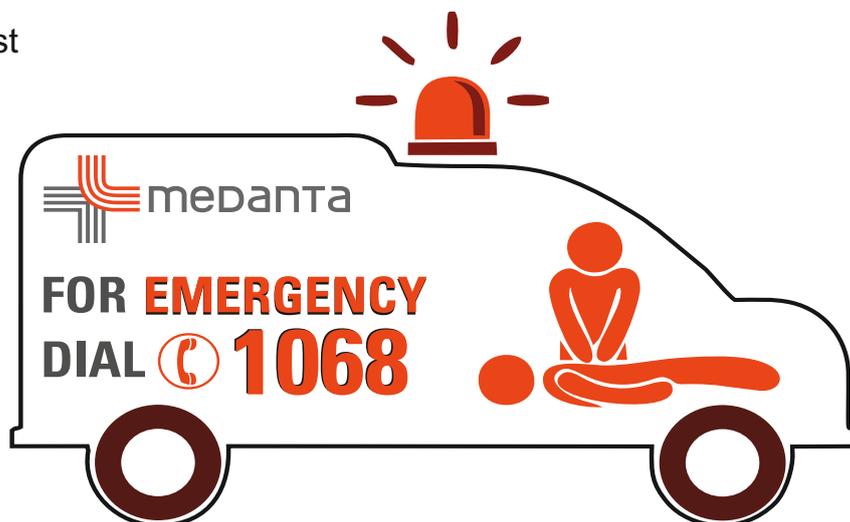


- Patient must be in communication with the treating doctor and promptly report in case of any deterioration.
- The patient must continue the medications for other co-morbidities/illness after consulting the treating doctor.
- Patient to follow symptomatic management for fever, running nose and cough, as warranted.
- Patient may perform warm water gargles or take steam inhalation thrice a day.
- If fever is not controlled with a maximum dose of Tab. Paracetamol 650 mg four times a day, consult the treating doctor.
- Do not rush for self-medication, blood investigation or radiological imaging like chest X-ray or chest CT scan without consulting your treating doctor.
- Steroids are not indicated in mild disease and should not be self-administered. Overuse and inappropriate use of steroids may lead to additional complications.
- Treatment for every patient needs to be monitored individually as per the specific condition of the patient concerned and hence generic sharing of prescriptions should be avoided.
- In case of falling oxygen saturation or shortness of breath, the patient may require hospital admission and should seek immediate consultation of their treating doctor.
- Take drugs such as Remdesivir, Dexamethasone, Tocilizumab, Baricitinib, Molnupiravir, etc., only if prescribed by the treating doctor.

WHEN TO SEEK MEDICAL ATTENTION

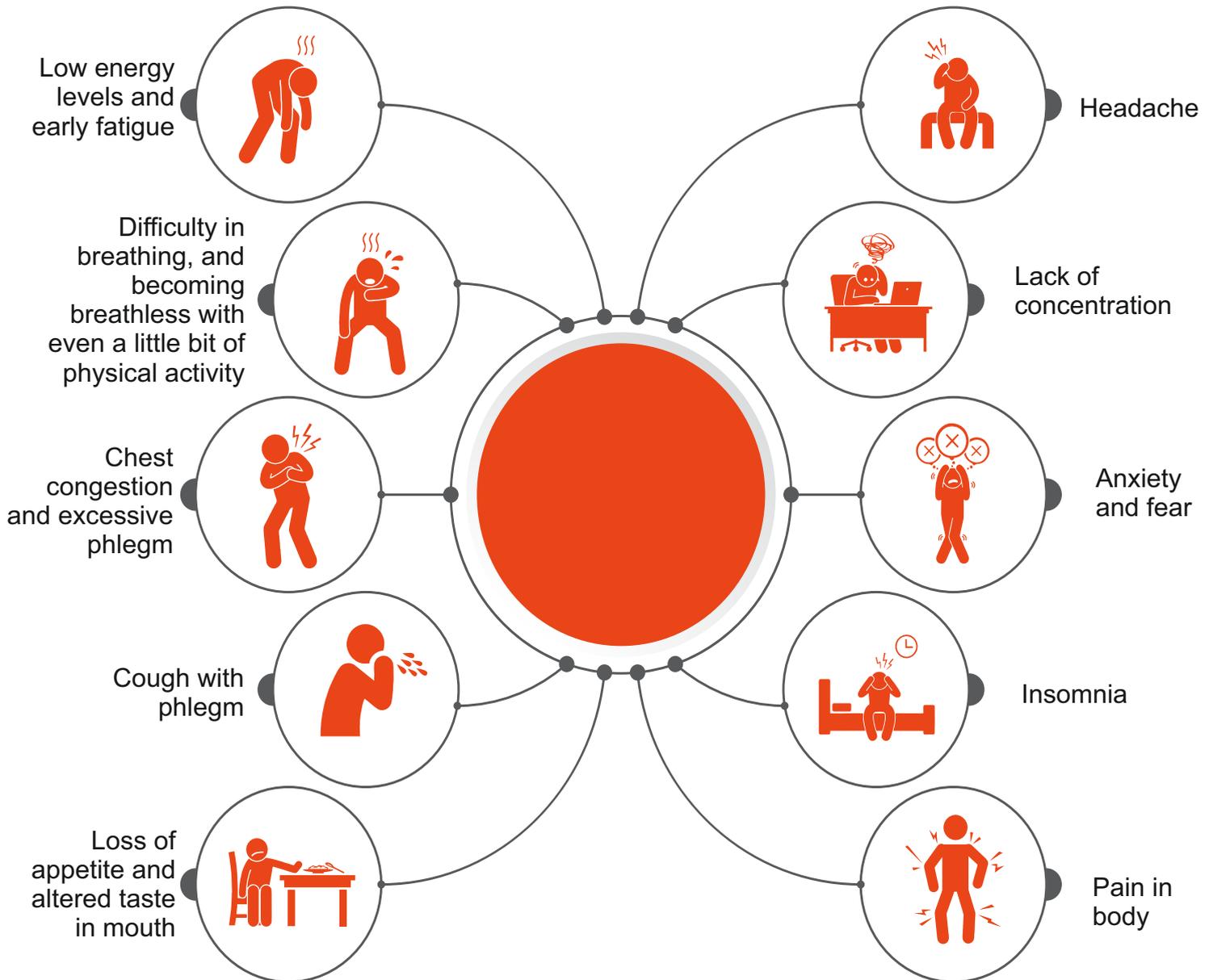
Patient/caregiver should keep monitoring their health. Immediate medical attention must be sought if serious signs or symptoms develop. These could include:

- Unresolved high-grade fever (more than 100° F for more than 3 days)
- Difficulty in breathing
- Dip in oxygen saturation ($SpO_2 \leq 93\%$ on room air at least 3 readings within 1 hour) or respiratory rate >24 / min
- Persistent pain/pressure in the chest
- Mental confusion
- Severe fatigue and myalgia

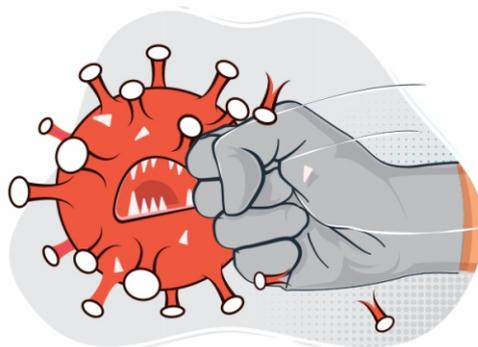


WINNING SMALLER BATTLES DURING RECOVERY

Patients suffering from COVID-19 may experience symptoms such as:



Some of the symptoms will get better on their own, as time passes. Other symptoms will require patience and efforts from your side. However, the actual recovery may take a much longer time.



MANAGING YOUR COUGH



Tips to manage a dry cough

A dry cough is likely to put greater strain on your throat. The following strategies can be used to manage a dry cough:



Stay hydrated by drinking plenty of water (lukewarm preferably).



Drink warm honey and lemon or another warm drink like kadha to soothe irritated throat.



Take small sips of fluids instead of taking large sips to facilitate swallowing.



Salt water gargle or 2% povidone iodine gargle (1 part 2% povidone iodine and 3 parts water) can be effective for treating a sore throat.



Steam inhalation is necessary to cure a dry cough. So pour hot water into a bowl and put your head over the bowl and breathe in the steam. If comfortable, cover your head and bowl with a towel. You can also use a steam inhalation machine if you have one.



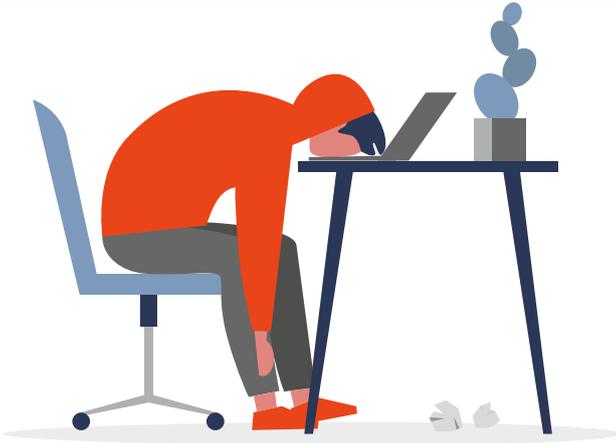
If you feel the need to cough but don't have a soothing drink or water at hand, swallow repeatedly.

Tips to manage a productive cough

A phlegmatic or productive cough can become difficult to manage since you have to spit out the phlegm-filled sputum regularly. It's also important to note that viral infections, especially COVID-19, are contagious, so proper disposal of sputum is very important. You should also ensure that the sink where you dispose of your sputum is regularly disinfected. The following strategies can be used to manage a productive cough:

- Keep yourself hydrated with lukewarm water, broths, soups, herbal teas and kadha.
- Take steam inhalation at least thrice a day to loosen the phlegm congested in your lungs.
- Lie on either the left or the right side, instead of lying on your back. This might help drain the phlegm faster.
- Movement makes the lungs function, and it can also move the phlegm to facilitate your spitting it out. So, try to be mobile by walking within your room.

FATIGUE MANAGEMENT



Fatigue during COVID-19 can make you feel drained and extremely tired both physically and mentally. It is essential to keep a positive outlook and spend time practicing self-care. You can manage your fatigue through the following:



Eat food rich in nutrients.



Prepare a pre-sleep relaxing ritual such as meditation or warm bath to promote good sleep. Also, try to get a few naps during the day.



Drink adequate amount of water to stay hydrated.



Ensure that your room is well-ventilated, so that you get adequate sunlight and fresh air.



Do basic stretching for a minute or two every 4-6 hours.

QUIT SMOKING - IT WILL HELP

Smoking negatively impacts lung health, inhibits the body's responsiveness to infections, and suppresses immunity. Compared to non-smokers, smokers are 2.4 times more likely to be admitted to an intensive care unit, need mechanical ventilation or die, according to a study*.



*Source: Tob Induc Dis. 2020 Mar 20;18:20. doi: 10.18332/tid/119324

TAKING CARE OF YOUR EMOTIONAL WELLBEING

The experience of having COVID-19 can be very stressful with fear and anxiety. The disease may impact your emotional wellbeing along with your physical wellbeing. Psychological impact of infection can vary from immediate effects, like:



- Fear and worry about your own health and the health of your loved ones, your financial situation or job, or loss of support services you rely on
- Fear of social stigma
- Irritability, anger, confusion
- Frustration, loneliness
- Denial, anxiety, depression, insomnia, despair

HOW TO COPE WITH STRESS?

Here are some things which you can do to cope with the stress, fear and anxiety:



- Take a break from constant watching the news or limit the time for news
- Stay connected with your loved ones over audio or video calls
- Avoid too much screen time
- Indulge in your hobbies
- Get adequate rest
- Maintain a healthy diet
- Do light exercises as your condition permits
- Do not hide your illness
- Speak accurately about the risk from COVID-19, based on scientific data and latest official health advice
- Share positive stories of those who have recovered from COVID-19

MAINTAINING A HEALTHY DIET



Good nutrition is very important before, during and after an infection. While no foods or dietary supplements can prevent COVID-19 infection, maintaining a healthy diet is an important part of supporting a strong immune system.

Eat a variety of foods to ensure adequate intake of important nutrients.

Energy-rich foods: These foods are a source of carbohydrates that provides energy to the body. They include cereals (wheat, rice, maize, etc.), fats/oils, sugars.

Body building foods: These foods provide protein to the body. Pulses (all dals, beans, legumes), animal foods (eggs, meat, poultry, fish), milk and milk products. Requirements of proteins also increase during infection for the proliferation of immune cells and the synthesis of chemical compounds.

Protective foods: These foods are sources of vitamins and minerals that play a significant role in immunity. These include seasonal fruits and vegetables (dark green leafy, yellow and orange coloured, citrus, and other fruits). Vitamin A, vitamin E, vitamin C, minerals such as zinc, copper, iron, selenium are known to influence the immune response.

Immunity Boosters: Ayurvedic immunity promoting measures:

- Drink herbal tea / decoction (kadha) made from tulsi (basil), dalchini (cinnamon), kalimirch (black pepper), shunthi (dry ginger) and munakka (raisin)-once or twice a day. Add jaggery (natural sugar) and / or fresh lemon juice to your taste, if needed.
- Golden milk-half tea spoon haldi (turmeric) powder in 150 ml hot milk-once or twice a day.
- Add ginger and garlic to cooking.
- Drink warm to normal water and keep hydrated.

Healthy Tips:

- Do not skip meals and divide your daily calories into 5-6 small meals.
- Use whole grain cereals, whole grams and pulses, whole wheat porridge, whole wheat bread, oats etc. to incorporate fiber in your diet.

- Supplement wheat with whole channa and do not sieve flour (wheat and channa 4:1 ratio). Mix rice with whole grams or dals in a ratio of 1:1 to incorporate fiber.
- Consume at least 4-5 servings of fresh green vegetables and fruits/day.
- Use olive /canola/ rice bran / soy /mustard oil. Change oils in couple of months.
- Almonds, walnuts, flax seeds are good sources of antioxidants include in everyday diet.
- Water intake: 2 litres/day.
- Limit intake of excess salt, processed and preserved foods.
- Restrict alcohol, tobacco and smoking.

An adult with no pre-existing disease and with no co-morbidities (like hypertension, diabetes, chronic kidney disease, cardiac disease) should have a 2000 calorie per day diet plan.

Persons with any co-morbidity and any underlying condition should consult their doctor/dietician/nutritionist for their individualized diet plan.

24-hour food intake (For reference)

Foods	Weight (g)	Calories	Protein
Cereals - Whole wheat atta / porridge / whole wheat bread / brown rice/oats	180	630	18
Milk low fat - 3% (toned)	500	302	17
Curds (low fat milk)	240	145	8
Paneer (low fat milk)	75	217	12
Egg white	2	32	8
Fish / lean chicken	60	150	14
Legumes (with husk)	75	240	15
Fruit (seasonal)	400	160	-
Vegetable A (tori, lauki, capsicum, brinjal, cauliflower, spinach, mustard, tomato)	250	40	3
Vegetable B (Peas, beans, carrot, pumpkin, ladies finger, onion, radish)	200	64	4
Cooking oil	20 ml	180	-
Sugar (honey, jaggery, jam, jelly)	15	60	-

WHEN TO DISCONTINUE HOME ISOLATION



Patients can end home isolation after at least 7 days of testing positive and 3 successive days without fever. There is no need for re-testing after the home isolation period is over.



Step up to fight **COVID-19**

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