GOVT. OF NCT OF DELHI DIRECTORATE GENERAL OF HEALTH SERVICES

Public Health Wing-IV

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F.No.350/DGHS/PHW-IV/COVID-19/Domiciliary Oxy. Support/2020/962-1033 Dated:15-05.2021

Sub: Domiciliary Oxygen Support for COVID-19 recovered patients discharged from COVID Hospitals

I am directed to convey the approval of Competent Authority regarding the provision of Domiciliary Oxygen Support via provision of Oxygen Concentrators at home, for COVID-19 positive patients discharged from COVID-19 Hospitals that are prescribed the same at the time of discharge or thereafter by the treating physician.

The following Annexures are attached along with:

Annexure-1: SOPs for Domiciliary Short-Term Oxygen Therapy (STOT) for COVID-19 recovered patients, being discharged from COVID Health Centre/Hospitals

Annexure-2: Operational Guide for District Nodal Officers

Annexure-3: District-wise List of Offices and Nodal Officers

Annexure-4: Format for Undertaking

Dr. B.S. Charan

Addl. Director (PHW-IV)

DGHS, Govt. of NCT of Delhi

F.No.350/DGHS/PHW-IV/COVID-19/Domiciliary Oxy. Support/2020/962-1033 Dated: 15.05.2021

Copy to:

- 1. PS to Pr. Secy. (H&FW), GNCTD
- 2. OSD to Hon'ble MoH, GNCTD
- 3. PS to DGHS, GNCTD
- MD/MS of all COVID-19 Hospitals (Delhi Government/Central Government/Railway/ Army/Autonomous/Hospitals under Local Bodies).
- 5. DMs (All Districts, GNCTD)
- 6. CDMOs (All Districts, GNCTD)
- 7. DSOs (All Districts, GNCTD)
- 8. MD/MS Caretaker of all Private COVID-19 Hospitals through MS (NH) DGHS, GNCTD
- 9. Guard File

Dr. B.S. Charan

Addl. Director (PHW-IV)

DGHS, Govt. of NCT of Delhi

SOPs for Domiciliary Short-Term Oxygen Therapy (STOT) for COVID-19 recovered patients, being discharged from COVID Health Centre/Hospitals

- Domiciliary Oxygen Support will be provided to all patients categorized as Moderate
 to Severe, who have recovered and are being discharged from the COVID-19
 Designated Facilities (Government/ Private) that are prescribed Domiciliary Oxygen
 Support/Short Term Oxygen Therapy (STOT) at home.
- A Nodal Officer shall be designated at each COVID-19 Designated Facility (Government/ Private), who will be responsible for sharing details of recovered COVID-19 patients to be discharged on that day, with STOT requirement at home, with the concerned district Nodal Officer by 11:00 AM daily.
- The District Nodal Officer will share the details with the Mobility Partner, including residential address of the patient, their contact details, and location for Device Pick-Up.
- 4. The hospital will ensure that the requirement of STOT at home post recovery is clearly mentioned in the discharge slip being provided to the patients/care-giver, along with the estimated flow rate prescribed.
- 5. For issuing of oxygen concentrator,
 - (i) Voter I-Card which serves as the proof of normal residence of the person is to be obtained from the patients/care giver as a pre-requisite. In case of minors, the parents Voter I-Card Identity proof would suffice. The oxygen concentrator will be issued after physical inspection of place of stay and relevant proof of residence obtained from the concerned person/ owner.
 - (ii) Copy of Discharge Slip, where STOT has been prescribed to be obtained in physical or electronic form.
 - (iii) Undertaking to be taken from the patient/care giver (ANNEXURE-IV)
- The patients will be provided with PulseOxymeter and Oxygen Concentrator post verification, and the trained person accompanying the device shall also provide a Demo regarding operation of the equipment being issued.
- SpO₂ should be self-monitored by the patient/ caregivers every 6 hourly for 14 days after discharge, and a written record should be maintained by the patient for the same (with date and time).
- 8. If at any point during the 2 week observation period after discharge from ICU.
 - a) Recorded SpO₂ < 93% in 2 consecutive readings, or
 - b) Recorded SpO₂ < 93% after 3 minute of ambulation,
 - c) Nocturnal Hypoxia with SpO₂ < 93%

Then, the patient will become eligible candidate for Domiciliary Short Term Oxygen Therapy (STOT). Also, in such a case, the patient/caregiver can call 1031 helpline between 9 AM to 6PM, after tele-consultation with a doctor, the concentrator would be delivered, subject to advise by the doctor.

- The patient will be provided contact details of concerned Nodal Officer / Medical
 Officer Incharge at the time of delivery, on which the persons can contact in case of
 any issue or breakdown of the machine.
- The District Nodal Officer will supervise and ensure the installation and maintenance of the oxygen concentrators at patient's home with assistance of the team. The team will also provide educational leaflets and explanation/ precautions about the operation of the machine and fire hazard to the patients/ caregivers.
- The District Team will also keep follow up of all the patients started on Short-Term Oxygen Therapy (STOT), by tele-presence on a daily basis, and by weekly physical

- visits from nearby facility. This is to be done till supplementation is no more required or 2 months period, whichever is earlier.
- 12. The DSO/CDMO of the district will be monitoring the distribution of oxygen concentrators. To facilitate distribution, 200 oxygen concentrators will be placed at the CDMO office of each district.
- 13. Maximum duration for which the concentrator will be loaned to a patient under this policy is 2 months, post which the concentrators will have to be returned to the concerned facility. If oxygen therapy is required after 2 months, then the patient will be re-evaluated by a physician and will be prescribed on Long Term Oxygen Therapy (LTOT) as per existing government policy of pre-COVID pandemic period.
- 14. Also, this Domiciliary Oxygen Support will not include patients already on LTOT (before COVID-19 diagnosis) for other co-existing pulmonary illness.

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Operational Guide for District Nodal Officers

(Domiciliary Oxygen Support for COVID-19 positive patients discharged from COVID Hospital/Health Centre)

- The District Nodal Officers will coordinate distribution of Oxygen Concentrators (with Pulse Oxymeter, if not provided earlier) to patients who are discharged from COVID ICU and are prescribed Domiciliary Oxygen Support/Short Term Oxygen Therapy at home at the time of discharge.
- 2. SpO₂ should be <u>self-monitored</u> by the patient/ caregivers <u>every 6 hourly for 14 days</u> after discharge, and a <u>written record</u> to be maintained by the patient/caregivers for the same (with date and time).
- 3. If at any point during the 2-week observation period after discharge from hospital,
 - d) Recorded SpO₂< 93% in 2 consecutive readings, or
 - e) Recorded SpO₂<93% after 3 minutes of ambulation, or
 - f) Nocturnal Hypoxia with SpO₂<93%

Then, the patient will become eligible candidate for Domiciliary STOT.

- In case the patient is suffering from any <u>pre-existing pulmonary illness</u>, then the patient is required to be <u>referred to a specialist</u>, for expert evaluation and prescription, if needed.
- Also, this Domiciliary Oxygen Support will <u>not include patients already on Long-Term</u>
 Oxygen Therapy (LTOT) (before COVID-19 diagnosis) for other co-existing pulmonary illness.
- On prescription, the oxygen concentrator will be delivered at home, during the
 working hours (till 8pm), same day. In case the patient faces any difficulty till the
 delivery of oxygen concentrator at his/her home, he/she is to be advised to
 immediately contact 102 and shift to a non-COVID Hospital.
- 7. The District Team will also keep follow up of all the patients started on Short-Term Oxygen Therapy (STOT), by tele-presence on a daily basis, and by weekly physical visits from nearby facility. This is to be done till supplementation is no more required or 2 months period, whichever is earlier.
- 8. The District Nodal Officer will <u>supervise</u> and <u>ensure the installation and maintenance</u> of the oxygen concentrators at patient's home with assistance of the team. The delivery team will also provide educational leaflets and explanation/ precautions about the operation of the machine and fire hazard to the patients/ caregivers.



 The Oxygen concentrators though are of different manufacturers, but the basic operations are almost similar, and a for quick reference, kindly refer to the video link: HINDI

https://www.youtube.com/watch?v=XCGPr5DHEho&t=7s

ENGLISH

https://www.youtube.com/watch?v=JyVYF YeFuA

- Basic Points to be taken care of are:
 - a. Check that the Plug is Indian Type
 - b. Advise patient to fill Humidifier to appropriate level, before starting the machine
 - c. The air filter needs to be checked every 15 days
 - d. Explain in detail how to attach and use the nasal cannula
 - e. Power On/Off and Flow meter functioning to be explained in detail
 - f. Regular O2 saturation monitoring to be done, while using the concentrator
- 11. The use of oxygen concentrators should be with caution, due to the fact that oxygen is highly inflammable. Hence, the equipment should always be kept away from inflammable objects/sources and similar caution should be kept in mind while operating the machine.
- 12. The patient needs to <u>self titrate</u> the flow rate to <u>reach target O2 saturation of 96%.</u> Discontinuation of concentrator should be done if Target O2 saturation is reached and maintained on room air for 72 hours. The above procedure is to be repeated, whenever the saturation fall below 93%, as per the observation described in Point (3).
- 13. The patients are to be provided <u>contact details</u> of the concerned person to be contacted in case of <u>any issue or breakdown</u> of the machine, by the concerned District team.
- 14. The designated officer/facility will also keep <u>follow up</u> of all the patients started on domiciliary oxygen therapy, by <u>tele-presence</u> on a <u>daily basis</u>, and by <u>weekly physical visits</u>. This is to be done till supplementation is no more required or 2 months period, whichever is earlier.
- Maximum duration for which the concentrator will be <u>loaned</u> to a patient under this policy is <u>2 months</u>, post which the concentrators will have to be returned to the concerned facility. If oxygen therapy is required after 2 months, then the patient will be re-evaluated by a physician and will be prescribed on LTOT as per existing government policy of pre-COVID pandemic period.

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ANNEXURE-III

DISTRICT-WISE LIST OF OFFICES AND NODAL OFFICERS

O.	DISTRICT	OXYGEN CONCENTRATOR DISTRIBUTION SPOT	NODAL PERSON	
EAST		COVID CARE CENTER, Commonwealth Games Village, Akshardham Sports complex, Delhi	Dr Prakash Sati	
	WEST	AAM AADMI POLY CLINIC A2 paschim vihar, Near Radha Krishna Mandir New Delhi 63	Dr Reeta Mr. Uttam	
	NORTH	Office Of Chief District Medical Officer, 1st floor, Gulabi bagh dispensary building, Delhi Govt emplyees flats, Gulabi Bagh Delhi	Dr Amit	
	SOUTH	DISTRICT PROGRAM MANAGEMENT UNIT Delhi Govt.Dispensary , Third Floor , PVR Complex , Saket, New Delhi .	Dr.Pummy	
	NORTH EAST	DISTRICT DRUG STORE, North East District, F-2 Nand nagri extension, First floor delhi govt dispensary sunder nagri Delhi	Dr Neeraj Dubey	
5	NORTH WEST	CIC , DUSIB flats Sultanpuri Block-A 3 Opposite Police Station Sultanpuri, Delhi	Ms Meenu Nasa	
7	SOUTH EAST	OFFICE OF CHIEF DISTRICT MEDICAL OFFICER DGD building PVR complex, Saket 1st Floor ,Delhi govt.Dispensary Building, Pvr Complex Saket, New Delhi-110017	Dr Garima Jaiswal	
8	SOUTH WEST	SDM Office Dwarka, near Rajkiya pratibha school Sector-10, Dwarka, New Delhi	Dr Samir Pandit	
9	SHAHDRA	OFFICE OF CHIEF DISTRICT MEDICAL OFFICER Working Women Hostel, Jhilmil, Delhi - 110095	Dr.S K Nayak	
10	NEW DELHI	AAM AADMI POLYCLINICS Basant gaon poly clinic, Basant Vihar New Delhi -110057	Dr.Janardan Patel	
11	CENTRAL	OFFICE OF CHIEF DISTRICT MEDICAL OFFICER Delhigovt.Dispensary,Building,Gali No-4,Bagichi Allaudin,Nabi Karim,Pahar Ganj,New Delhi-110055	Dr.Somnath Patra	



FOR ISSUE OF OXYGEN CONCENTRATOR FOR SHORT-TERM OXYGEN THERAPY (STOT) AT HOME TO HOSPITAL DISCHARGED COVID-19 PATIENTS

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