Details of every individual who takes COVID-19 test are uploaded by testing labs to ICMR portal

Unique ID generated for every individual i.e. called SRF and same is shared to patient through SMS

Test results are generated against SRF and uploaded to ICMR portal

BBMP special team called as COVID-19 patient tracking (CPT) cell functions 24/7

CPT cell will have access to download positive reports on hourly basis

Patients complete details will be derived from ICMR portal and generated BU code by uploading details to index application (IA)

Zones are auto assigned based on patient address

Once BU code issued patients details are automatically pushed to zonal logins for next course of action

The zone wise patients details are shared to StepOne on hourly basis to conduct online clinical triaging and to decide further shifting of patient
Every ZCCC has an in charge Nodal Officer with access to IA of that particular place.

4 Login Facilities are given to each zone.

Zonal team will reach out to the patient over phone to understand the current situation.

Based on the patient’s details, the zonal team determine if the patient has to be hospitalised, sent to COVID Care Centre or should be kept under Home Quarantine.

If Home Isolation is requested, the BBMP team will visit the patient’s residence to check the suitability.

If it is not suitable for Home Isolation, the patient would be shifted to CCC or Hospital depending on the patient’s condition.

Periodical check-up is done to monitor the patient’s recovery.

If the patient needs to be shifted to CCC or hospital, the bed allocation is done through COVID Hospital Bed Management portal.

ZCCC shares the patient details to ambulance and shift the patient.

If Rapid Antigen Testing is done to asymptomatic or mild symptomatic patient the ZCCC recommends Home Isolation or CCC.

If Rapid Antigen Testing is done for severe symptomatic patient, immediate hospitalization is done after notifying 108.
- Hospitals get notifications about new admission pending as they login through SAST portal
- Patient is then admitted to SAST portal and the bed availability will automatically get updated to CHBMS portal
- Upon patients discharge the details of the same is updated to SAST portal, which will reflect in CHBMS
- At any point of time CHBMS portal shall reflect the bed availability status across COVID-19 hospitals
- Hospitals Shall honour all admission made through CHBMS portal
- Patient allocated to COVID Care Centres (CCC) through CHBMS portal
- Officials of CCC will login to portal and update the admission immediately
- In case of walk-in patients (CCC) will use their portal to admit patient with at least SRF ID
- Continuously monitor patients health, if recovering then discharge after 10 days
- If the medical condition is getting worse shift patient to hospital and update same in portal
108 EMERGENCY AMBULANCE SERVICES

- 108 to focus on priority calls. Such as Severe Acute Respiratory Infection (SARI) shifting from CCC to hospitals, severely symptomatic patient tested under RAT, distress call of positive patient who need immediate hospitalization and non distress but panic call by positive patient seeking admission at CCC’s.
- 108 has given admin login to CHBMS and can directly block beds in CCC, HDU, ICU, ICU-V by using SRF ID in the following situation
  1) Distress call (SARI).
  2) Non distress but panic calls.
  3) Shifting of patient from CCC's to hospitals.
  4) Vivid suspects (SARI) distress call (use name and mobile number of patients).
  5) RAT - Severely symptomatic positive patient who are in distress and require hospitalization.
DETAILED WORKFLOW OF 108

COVID-19 POSITIVE PATIENTS:

1. Responsibility of shifting COVID-19 positive due to SARI conditions, non distress but panic calls to COVID Care Centres (CCC) and also shifting from COVID Care Centres (CCC) to hospitals
2. If the caller in distress (SARI positive), 108 team will login to CHBMS portal and allocate HDU/ ICU/ ICUV beds in COVID-19 hospital using SRF ID of patient
3. It is responsibility of 108 team to ensure no non COVID-19 patient gets admitted to COVID beds by daily verifying proof of having tested positive
4. In case of non medical distress positive patient needs physiological assistance and comfort 108 shall drop him at COVID Care Centres (CCC) and COVID Care Centres (CCC) shall admit such patient as an walk-in patient using SRF ID

Set up service at Government COVID Care Centres (CCC)

1. 108 to station ambulances as per COVID Care Centres (CCC) requirement for shifting of COVID-19 patients who have developed severe symptoms at COVID Care Centres (CCC)
2. 108 to deploy as many as ambulances as required for functioning of 10 Government COVID Care Centres (CCC)
3. 108 shall login to CHBMS and block beds in hospitals and then shift COVID-19 positive patients to hospitals
COVID-19 Suspect patients - Distress calls from SARI

1. SARI symptoms but not tested for COVID-19 patients shall be attended by 108 and shifted to hospitals with dedicate isolation beds
2. Login provided in CHBMS will allow 108 to block ICU/ICUV/Isolation ward using just name and mobile numbers of patients
3. Once such admitted patient turn positive at hospital after COVID-19 test, hospitals will intimate 108 for either blocking COVID beds in the same hospital or shift patient accordingly
4. If no COVID beds are available in the same hospital then 108 shall shift patient to other hospitals having beds by blocking CHBMS

Rapid Antigen Testing for positive patients who need Hospitalisation

• RAT is being undertaken at UPHCs and through mobile teams.
• Only when RAT +ve patient is severely symptomatic and is under distress will require hospitalisation. The UPHCs shall immediately notify 108 for shifting patient to Hospital.
• In all other cases the Zonal Control Team shall be responsible for HI or shifting patients to Health Care Centres.
• 108 will login to CHBMS and block HDU/ICU/ICU-V beds in hospitals as per availability and then transport the patient.