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# COMMISSIONERATE

## Health & Family Welfare Services

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### Guidelines

**Sub:** Standard Operating Procedure (SOP) for the use of  
REMDESIVIR Injections in COVID-19 treating facilities.

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#### 1. BACKDROP:

- 1.1. The state has initiated all possible steps and beyond to prevent the deaths of patients suffering from COVID-19 disease, admitted and treated as Government referred cases in recognized and KPME registered private hospitals and the government facilities.
- 1.2. The state is providing the vital Remdesivir injection free of cost for the treatment of serious and very serious COVID-19 in-patients at the discretion and decision of the treating doctor.

#### 2. STANDARD PROCEDURE:

- 2.1. The drug Remdesivir is not only a costly drug but also a vital, valuable, investigational anti viral medicine used for treatment of certain patients with COVID-19 in a hospital set up.
- 2.2. The hospitals which use this drug supplied by the government for the free treatment shall enter the batch number and daily dose administered to the patients in the patient case sheet, COVID in-patient register and the treatment portal through a responsible person working in the in-patient ward, which shall be duly attested by the treating physician.

- 2.3. In so far as the government patient admitted in private hospitals similar procedure mentioned in para 2.2 shall be followed and the patients so treated shall not be charged for payment either directly or indirectly or through any ancillary means. The SAST shall do necessary follow up for implementing this.
- 2.4. On an average each severally sick COVID-19 in-patient may require six Remdesivir injection vials for completion of the treatment.
- 2.5. Some acute and unfortunate in-patients may not be in a position to complete the five day regimen of the anti viral Remdesivir injection resulting in spending less than average number of vials of Remdesivir.

### **3. MONITORING:**

- 3.1. But in such instances the Remdesivir injection shall not be shown as spent against the name of the in-patient.
- 3.2. A division wise committee of expert doctors have been constituted to monitor directly and indirectly through reports about the movement of Remdesivir injection vials and regulate their use for the bonafied purpose of treating sick and severally sick COVID-19 in-patients in a hospital set up.
- 3.3. The committees have been directed to keep a close watch on the expenditure of Remdesivir vials in each government and government assisted private hospitals in order to regulate seamless availability of Remdesivir injection in each institutions in order to prevent the death of all the COVID-19 patients admitted for treatment.
- 3.4. The government and private hospitals storing the government supplied Remdesivir injection shall open a exclusive stock registers for the accountability of Remdesivir drug which is highly resource intensive.

### **4. PRESERVING THE USED VIALS:**

- 4.1. After the administration of the Remdesivir drug to the patient the wrapper of the injection vial shall be crushed and pinned to the case

sheet of the patients, so that, each patient who is administered with the injection shall have six flattened wrappers pinned to the case sheet.

- 4.2. There may be certain exceptions like when the patient is lost the wrappers may be less, if the event happens before the completion of the course or in some cases the requirement may be more than six vials on an average. But such instances are not frequent and common.
- 4.3. The vial of Remdesivir injection after the administration of the drug shall be preserved for the inspection by Divisional Monitoring team, officers of the Department of Health and Family Welfare, District Administration or officers from the SAST.

  
Commissioner

**Health & Family Welfare Services**

Copies for strict guidance and compliance to:

1. Superintendents of all the Government Medical College Hospitals.
2. All the District Surgeons.
3. All the Private Hospitals admitting and treating government referred covid-19 patients.
4. District Health & Family Welfare Officers of all the districts.

Copies for information:

1. Chief Secretary to the Government.
2. Additional Chief Secretary to the Government, Health & Family Welfare.
3. Commissioner, BBMP.
4. Mission Director, NHM.
5. Director, Health & Family Welfare Services.
6. Director, Medical Education.
7. Executive Director, SAST.
8. Deputy Commissioners of all the district.
9. Joint Director, IEC.
10. Joint Director, Medical, HFWs.
11. Divisional Level monitoring teams.