# Annex 2: MANAGEMENT OF SUSPECTED, PROBABLE AND CONFIRMED COVID-19 CASE

#### 1. OVERALL MANAGEMENT OF COVID-19 IN MALAYSIA

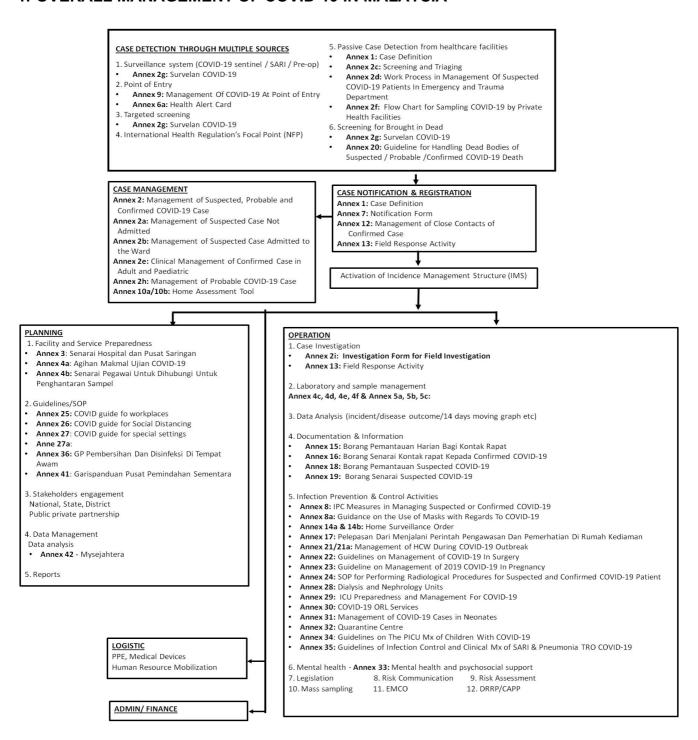


Figure 1: Overall management and response of COVID-19 cases in Malaysia.

# 2. CRITERIA FOR HOSPITAL ADMISSION FOR SUSPECTED, PROBABLE AND CONFIRMED CASE

- a. All COVID-19 cases confirmed (Laboratory confirmed case)<sup>1</sup>
- b. All Probable COVID-19 cases
- c. Suspected COVID-19 who is clinically ill<sup>2</sup>
- d. Suspected case with uncontrolled medical conditions, immunocompromised status, pregnant women, extremes of age (< 2 years or > 60 years old)
- e. Suspected case who does not fulfil the above criteria but are not suitable for home surveillance, to consider admission in quarantine station (Annex 32)
- <sup>1</sup> COVID-19 positive from low risk group who are asymptomatic or mildly symptomatic can be admitted directly to low risk COVID-19 quarantine and treatment centres after discussion with relevant physician.
- <sup>2</sup> The clinical condition of the patient is based on clinical judgement of the clinician in-charge

# 3. CHECKLIST FOR SUITABILITY OF SUSPECTED CASE TO UNDERGO HOME SURVEILLANCE:

(The checklist is provided as a guide, hence the assessment of patient suitability for home surveillance is tailored from one patient to another).

- a. Has a separate bedroom with en-suite bathroom (preferable); if not, common bathroom with frequent disinfection
- b. Has access to food and other necessities
- c. Has access to face mask, glove and disinfectant at home
- d. Able to seek medical care if necessary and return with own private transport
- e. Able to adhere to instruction to follow home surveillance order
- f. Able to stay away (at least 2 meter apart) from the high-risk household members (e.g. individual > 60 years old, young children <2 years, pregnant women, people who are immunocompromised or who have chronic lung, kidney, heart disease)

## 4. CONFIRMED CASE OF COVID-19

# All confirmed case need to be:

- Admitted to Admitting Hospital (as mentioned in section 2)
- Notified and registered as COVID-19 case to PKD as soon as possible.
- Transported to Admitting Hospital by designated transport arranged by PKD
- Managed clinically as per recommendation in Annex 2e
- Field Investigation by PKD as per Annex 13

# 5. CRITERIA FOR TRANSFER TO A STEP-DOWN FACILITY

- Confirmed case of COVID-19 who fulfilled the following criteria
  - a. At least seven days have passed since symptoms first appeared AND
  - b. At least three days (72 hours) have passed since recovery of symptoms (defined as resolution of fever without antipyretics and improvement in respiratory symptoms [e.g., cough, shortness of breath]) AND stable comorbids
- Patient can be transferred to identified **Step Down Centers** until discharge.
- Step Down Center can be from an identified ward in district hospital or an area which is suitable within the acute hospital.
- The coordination and management of these centers is under the responsibility of the hospital.
- Daily monitoring by medical personnel must be done in this center.

# 6. CRITERIA FOR DISCHARGE FROM INFECTIOUS DISEASE WARD FOR CONFIRMED COVID-19 CASE

- 6.1. Patients with laboratory-confirmed COVID-19 can be discharged from infectious disease ward or released from COVID-19 Care Pathway when fulfil the following criteria:
  - a. Person with COVID-19 who have symptoms:

At least 10 days have passed since symptom onset

#### And

At least 24 hours have passed since resolution of fever without the use of fever-reducing medications

### And

Other symptoms such as dyspnoea, cough have improved

b. Person infected with SARS-CoV-2 who never develop COVID-19 symptoms:

Maybe discharged 10 days after the date of their first positive RT-PCR test for SARS-CoV-2

Note: No COVID-19 test is required before patient is discharged from the ward.

For **immunocompromised hosts** such as those on chemotherapy, bone marrow or organ transplantation, HIV with low CD4 cell count and prolonged use of corticosteroids or other immunosuppressive, releasing from COVID-19 care pathway has to be taken on a case to case basis.

# 6.2. Confirmed covid-19 case requiring prolonged in-patient care

- a. COVID-19 cases fulfilling the discharge criteria above but still requiring ongoing inpatient care such as stroke rehabilitation can be discharged from COVID care and transferred to the appropriate ward.
- b. Category 5 patients in ICU, who still require ICU care beyond 28 days of illness, can also be discharged from COVID care. This is based on recent data that infectious viruses have not been isolated beyond day 20 of illness even in those critically ill.
- 6.3. Examples of Scenarios for the Discharged of COVID-19 Case
  - a. Scenario 1: Severe Illness
    - c. Discharged from ICU at day 12 of illness on nasal prong Oxygen
    - d. Off oxygen at day 14 of illness
    - e. Recovered with minimal cough and no exertional dyspnoea on walking to toilet, diabetes and hypertension well controlled at day 18 of illness
    - f. Conclusion: Fit for discharge at day 18 of illness
  - b. Scenario 2: Mild Illness
    - Mildly symptomatic on admission with no pneumonia (Day 5 of illness).
    - Asymptomatic after day 3 of admission (Day 8 of illness)
    - Conclusion: Fit for discharge at day 10 of illness (Day 5 of admission)
  - c. Scenario 3: Admission during pre-symptomatic period
    - On admission patient is asymptomatic, however develops symptoms on day 2 of admission. Symptoms subside after 5 days.
    - **Conclusion:** His onset of illness starts from day 2 of admission. Fit for discharge at day 10 of illness (Day 12 of admission)
  - d. Scenario 4: Residual disease
    - Admitted for CVA and found to be positive COVID-19
    - Pneumonia but does not require oxygen
    - **Conclusion:** Discharged from COVID-19 ward and can be transferred to stroke ward at day 10 since the date of COVID-19 diagnostic test positive.

### 7. POST DISCHARGE PLAN FOR CONFIRMED COVID-19 CASE

- a. For patients with co-morbidities, to arrange appointment for the follow-up at the nearest health facilities and to ensure adequate supply of medications until the next appointment. Brief summary should be prepared upon discharge.
- b. Upon discharge, all patients should be provided with the hospital's contact number and health education pamphlet (Guideline for COVID-19 Patient

Discharged from Hospital) as in Appendix 1.

# 8. Role of PCR testing after discharge from COVID care

For persons previously diagnosed with symptomatic COVID-19 and who remain asymptomatic after recovery, retesting is not recommended within 3 months after the date of onset of illness.

### **APPENDIX 1**



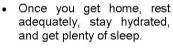
# **GUIDELINES FOR COVID-19** PATIENT DISCHARGED FROM HOSPITAL

This brochure is designed to provide information and advice for COVID-19 patients after going home.

# WHAT SHOULD YOU DO AT **HOME AFTER DISCHARGE?**





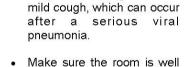


You may continue to feel

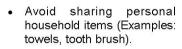
body aches, fatigue and/or

ventilated by opening the









windows.

#### CAN I GO BACK TO WORK?



Yes, you can return to work immediately after your sick leave is over.

#### INFORMATION YOU SHOULD KNOW

What we know about COVID-19

- You are over the period of danger.
- The risk of you spreading to those close to vou is considered minimal or nil.

What we don't know for sure yet

- There is no conclusive evidence that a person can have re-infection/ re-activation of COVID-19 after discharge.
- The duration of protection after COVID-19 infection is uncertain yet. Therefore, you should always follow the good practice of 3C and 3W (refer to diagrams beside).

# **AVOID 3C, PRACTICE 3W**







#### **GENERAL ADVICE**



Practice social distancing for at least 1 meter from others.



Advisable to wear face mask when in close contact with people.



Wash your hands with soap and water or use hand sanitizer regularly.



Cover your mouth and nose whenever you cough or sneeze.



Maintain good personal hygiene and cleanliness.



Keep good hydration and nutrition.



Consider extra protection for household members over 65 years or with underlying illness.



Please avoid or limit the number of visitors to your house.



Avoid going to crowded areas.

#### AM I COPING WELL?

Emotional disturbance is common during and after COVID infection.

Please ask for help if you experience symptoms below:

- Mood disturbances
- Frequent worries
- Difficulty sleeping or concentrating
- Feel hopelessness and restlessness
- Suicidal thought





#### HOW DO I ASK FOR HELP?

You can see your family doctor, or doctor at the nearest health clinic or hospital.

You also can call the hotlines below for further assistance.

# COVID-19



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**COVID -19** 



-

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#### SEEK MEDICAL ATTENTION





If you develop recurrence of COVID-19 symptoms or fall sick within 30 days of initial illness onset, you should contact the number stated below.

You should inform your healthcare provider that you have been treated as a COVID-19 patient before.



Hospital:



Contact No:

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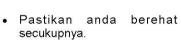


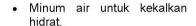
## GARIS PANDUAN DISCAJ PESAKIT COVID-19 DARI HOSPITAL

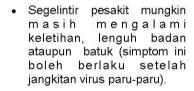
Risalah ini bertujuan untuk menyampaikan informasi dan nasihat kesihatan kepada pesakit COVID-19 yang telah sembuh dan dibenarkan pulang ke rumah.

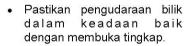
# APAKAH YANG ANDA PERLU LAKUKAN SEMASA DI RUMAH?

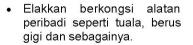












#### ADAKAH SAYA BOLEH KEMBALI BEKERJA?



Ya, anda boleh kembali bekerja sebaik sahaja cuti sakit anda berakhir.

#### PERKARA YANG ANDA PERLU TAHU

Apa yang kita tahu mengenai COVID-19

- Anda tidak lagi berada dalam tempoh bahaya penyakit.
- Kebarangkalian untuk anda menjangkiti orang lain adalah sangat rendah atau tiada.

#### Perkara yang kita belum pasti

- Tidak ada sebarang data atau bukti untuk mengatakan seseorang yang telah pulih dari COVID-19 boleh dijangkiti semula.
- Tempoh perlindungan antibodi setelah pulih dari jangkitan COVID-19 masih tidak diketahui. Jadi anda dinasihatkan untuk mengamalkan konsep 'Elak 3C, Amalkan 3W' (Sila rujuk gambarajah di sebelah).

#### ELAKKAN 3C, AMALKAN 3W













#### **NASIHAT AM**



Praktikkan penjarakan sosial sekurang-kurangnya 1 meter dari satu sama lain.



Digalakkan memakai topeng muka jika di tempat orang ramai.



Cuci tangan dengan kerap menggunakan sabun dan air atau 'hand sanitizer'.



Menutup mulut dan hidung sekiranya batuk atau bersin.



Amalkan kebersihan diri.



Pastikan pengambilan makanan yang berkhasiat dan air yang mencukupi.



Ahli keluarga yang berumur 65 tahun ke atas dinasihatkan untuk lebih berwaspada dan mengambil berat langkah-langkah pencegahan yang disarankan.



Dinasihatkan untuk tidak menerima atau menghadkan tetamu di rumah.



Jauhi diri daripada tempat yang sesak.

#### ADAKAH EMOSI SAYA STABIL?

Gangguan emosi kerap kali berlaku semasa dan setelah jangkitan COVID-19.

Anda dinasihatkan untuk meminta bantuan sekiranya terdapat simptom-simptom berikut:

- · Gangguan emosi
- Kerisauan melampau
- Kesukaran tidur atau konsentrasi
- Putus asa





### BAGAIMANA UNTUK MEMINTA PERTOLONGAN SEKIRANYA MENGALAMI GANGGUAN EMOSI?

Anda boleh merujuk ke fasiliti kesihatan berdekatan sama ada klinik atau hospital. Anda juga boleh menghubungi talian hotline dibawah untuk tindakan selanjutnya.

# COVID-19



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**COVID -19** 



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#### SEGERA DAPATKAN BANTUAN





Sekiranya anda mengalami gejala berulang atau jatuh sakit dalam tempoh 30 hari dari permulaan kemunculan gejala COVID-19, anda perlu menghubungi hospital seperti nombor di bawah sebelum anda pergi ke sana.

Anda juga perlu memaklumkan kepada petugas kesihatan bahawa anda pernah dirawat sebagai pesakit COVID-19 sebelum ini.

0	

Hospital :



No Telefon :

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