GOVERNMENT OF KERALA

Abstract

Health and Family Welfare Department - Cancer care treatment strategy for COVID 19 positive or suspected COVID19 patients in Kerala - General guidelines approved - Orders issued.

HEALTH AND FAMILY WELFARE (M) DEPARTMENT
G.O.(Rt)No.845/2020/H&FWD Dated, Thiruvananthapuram, 07/05/2020

Read : Report of the COVID Cancer Strategy Committee

ORDER

Government are pleased to issue the Cancer care treatment strategy for COVID 19 positive or suspected patients in Kerala as Annexure attached with this order for strict implementation during the COVID19 epidemic period.

(By order of the Governor)

RAJAN NAMDEV KHOBRA GADE
PRINCIPAL SECRETARY

To
The Director of Medical Education, Thiruvananthapuram.
The Director of Health Services, Thiruvananthapuram.
The State Mission Director, NHM, Thiruvananthapuram.
The Director, Regional Cancer Centre, Thiruvananthapuram
The Director, Malabar Cancer Centre, Thalassery, Kannur.
The Director, Cochin Cancer and Research Centre,Enakulam
All Principals/Superintendents of Government Medical Colleges
(Through DME)
All District Medical Officers (H) (Through DHS).
The Accountant General (A&E/Audit) Kerala, Thiruvananthapuram.

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Section Officer
ANNEXURE

CANCER TREATMENT STRATEGY FOR COVID 19 POSITIVE OR SUSPECTED PATIENTS IN KERALA

THE ISSUE
The COVID-19 incidence is marginally on the rise and expected to continue for the coming months. This has affected the inter district travel for patients and the management of noncommunicable diseases including cancer. Influx of Keralites from other states and other countries might change the COVID scenario in the state. Many of them are likely to have cancer or they may be on treatment of cancer.

Cancer care in Kerala is delivered by State Cancer Care Centres (RCC, MCC and CCRC) five Tertiary Cancer Centres attached to Government Medical Colleges and Oncology Units in District hospitals. State Level Cancer Care Centres are non-COVID hospitals. So it may be difficult to treat COVID positive cancer patients in these centres which may affect the routine function. Other cancer care centres which are attached to COVID centers need to adopt strategies to manage COVID suspected cancer patients. It is necessary to have State-wide strategy for caring diagnosed/suspected cancer patients who are COVID positive/symptomatically suspected/in quarantine during the pandemic.

DEFINITIONS

I. COVID Positive Patient: A Patient who is RT-PCR tested positive

II. COVID Suspected Patient:
   a) Patient who is symptomatic for COVID-19 infection
   b) Patient in Quarantine for COVID-19.
   c) Patient residing in COVID-19 high risk area/travel history to high risk area.

GENERAL PRINCIPLES

1. All COVID positive patients with cancer/undergoing diagnostic evaluation for cancer should be treated in a COVID hospital having cancer care facility (Preferably in MCH) and shall not be referred to Non COVID Cancer centres (RCC, MCC, CCRC)

2. All COVID positive cancer patients should be treated for COVID before initiation/continuation of cancer care. However, a Multi-disciplinary Medi1cal Board (MDMB) decision may be obtained regarding cancer care.

3. All COVID suspected patients will be tested for COVID with RT-PCR/Gene Expert before any cancer evaluation /treatment. This may be done in consultation with COVID Nodal officer in the region

4. Life-threatening cancer emergencies should be carried out in the hospital to which the patient presents, irrespective of COVID status making sure that all universal high-risk infection precautions are taken by all health care workers.

5. Surgical interventions may not be advisable for mild/moderate symptomatic COVID patients except in certain surgical emergency such airway obstruction, bleeding, intestinal obstruction. These procedures carry high risk of mortality and the decision shall be taken case-to-case basis after obtaining written informed consent.

6. Biopsy /Surgery in COVID positive patients may be deferred till patients become COVID negative. This decision shall be taken by MDMB based on the nature of the cancer, possibility of cure, risk involved etc.

7. COVID Suspected patients who require Biopsy /Surgery may be tested by RTPCR/ Gene Expert for COVID and if negative he/she can be taken up for the procedure provided the procedure can't be deferred till the quarantine period is over. If the condition permits, the procedure may be deferred for two weeks with
home-based observation of patients (as a precaution for 30% false-negative tests).

**CANCER TREATMENT STRATEGY FOR COVID POSITIVE /COVID SUSPECT PATIENTS- CANCER CENTRES (NON COVID)**

State Level Cancer Care Centres which are non-COVID hospital should have a COVID CARE RECEPTION. It should constitute a Multi-Disciplinary Medical Board (MDMB) incorporating the Multi-Disciplinary Tumor Board of the centre (MDTB) and COVID treating physician from a nearby major COVID treatment centre. A nodal officer may be appointed for co-ordinating the cancer care for COVID positive/suspected patients and the phone number of the COVID CARE RECEPTION may be published. A team of oncologists can be posted under the nodal officer specifically for COVID care if possible.

**General Guidelines for Cancer treatment.**

1. All COVID suspected patients requiring cancer treatment/cancer diagnostic evaluation may be referred to the treatment centre only after prior telephonic appointment preferably by the referring doctor. The institution Nodal officer shall be contacted for the purpose and the phone number and e-mail of the nodal officer shall be published. If a COVID positive patient is to be referred to a cancer centre, in any extreme situation, nodal officer at the cancer centre shall be contacted and only after consultation with the oncology team at the centre, the decision of transferring shall be taken.
2. All COVID suspected patients may be assessed at a COVID CARE RECEPTION. The staff in this unit should have adequate protective measures. At the COVID CARE RECEPTION the cancer and COVID related emergency may be assessed by the oncologist and the COVID treatment physician may be consulted depending on the severity of the symptoms of the patient at assessment. COVID suspected or positive Patients who need emergency oncology care may be treated/admitted in isolation room at the discretion of the oncologist in COVID CARE RECEPTION and MDMB may be called for.
3. All patients reporting to the OPD may be evaluated with travel and symptom history questionnaire. In case of any suspicion of infection they should be reported to the COVID CARE RECEPTION.
4. The cancer treatment of patients who need emergency care for their COVID positivity may be initiated only after cure of COVID infection.
5. Life-threatening cancer emergencies should be managed, irrespective of the COVID status by taking universal high-risk infection precautions.
6. Patients who required non-emergency cancer care may be deferred till the resolution of COVID infection and this decision is to be taken in the MDMB on case to case basis.
7. In the COVID CARE RECEPTION Three scenarios are to be considered
   a. If a patient on active cancer treatment becomes COVID positive, he/she shall be referred for COVID treatment. The continuation of cancer care is preferably delayed till patient become COVID negative, which may be decided by MDMB.
   b. COVID suspected patients seeking anticancer treatment needs assessment by the MDMB for the treatment plan.
   c. Patients who turn COVID positive while on follow up can be taken up for COVID treatment at COVID hospital.
8. In cancer centres the COVID patients need two types of patient care areas.
   a. **Isolation ward**— Two or Three rooms for COVID suspected patients who
need cancer care.

b. **Transient Isolation ward**: one or two beds for preparing the patient to be transferred to COVID hospital

9. A Multi-disciplinary Medical Board (MDMB) shall be constituted in the centre with the nearby COVID centre and an SOP may be made in this regard. The meetings can be direct consultations or virtual meetings depending on the centre.

10. For those COVID patients admitted in district centres/COVID hospitals, cancer centres can provide assistance in cancer treatment if required.

11. Isolation for COVID positive patients who require COVID observation shall be made in a COVID centre.

12. MDMB will decide on the cancer treatment regarding Chemotherapy and Radiation.

13. All such operations should have SOP for surgery, admission, Post-Operative care and discharge. The Medical, Nursing and Paramedical staff involved in such a procedure may be protected against self and hospital contamination based on the SOI.

14. Cancer Centre may conduct medical board meeting /zoom meetings with COVID treating physicians treating their cancer patients with COVID as part of MDMB.

**CANCER TREATMENT STRATEGY FOR A CANCER CENTRE ASSOCIATED WITH A COVID HOSPITAL (e.g., MEDICAL COLLEGES, DISTRICT HOSPITALS)**

All MCH and District Hospitals which are now COVID hospitals and have COVID CARE RECEPTION. The oncology wing in such a centre should form a Multi-Disciplinary Medical Board (MDMB) incorporating MDTB and COVID treating physician. A nodal officer may be appointed for co-ordinating the cancer care for COVID positive /suspected and the phone number of the COVID CARE RECEPTION may be published. A team of oncologists can be posted under the nodal officer specifically for COVID care if possible

**General Guidelines for Cancer treatment.**

1. All positive / suspected COVID patients requiring cancer treatment/ cancer diagnostic evaluation may be referred to the treatment centre only after prior telephonic appointment preferably by the referring doctor.

2. Cancer patients who are on treatment from any centre if tested positive for COVID and is admitted to a district COVID centre, the details of the patient may be informed to the District oncology centre (MCH or District hospital with oncology, facility) for cancer treatment advice, consultation if required.

3. If a patient on cancer treatment is advised quarantine, then it should be informed to the cancer centre.

4. All COVID Positive/ suspected patients who are referred for cancer treatment/ cancer diagnostic evaluation should be received in COVID CARE RECEPTION.

5. In the COVID Reception, the patient may be evaluated by surgeon/Oncologist for initial cancer assessment.

6. The treatment decision regarding the COVID and Cancer may be taken in a MULTIDISCIPLINARY MEDICAL BOARD (MDMB) and the timing of treatment and procedure if any may be decided by the MDMB.

7. The patient who needs admission for evaluation /treatment may be admitted
in isolation ward. If the patients is advised home quarantine, he/she can be evaluated on OPD basis with strict SOP for follow up.

8. Patients who are COVID positive/suspect and requiring biopsy/surgery may have to be operated in a designated Operation Theatre for COVID with its specifications.

9. COVID suspected patients should be evaluated for COVID by RT-PCR as part of pre-operative evaluation.

10. All such operating centres should have an SOP for surgery, admission, post OP care and discharge. The Medical and Nursing Paramedical staff involved in such a procedure may be protected against self and hospital contamination of the infection based on the SOP.

11. Decision on chemotherapy and Radiation will be taken by the MDMB based on SOP and cancer guidelines.

Each centre may have a standard operational procedure (SOP) in the following areas for COVID Positive and suspected patients regarding

1. COVID CARE RECEPTION and MDMB
2. Out-Patient care and day care chemotherapy service
3. Surgical procedure including Post-operative care