COVID-19 - COASTAL PLAN

Management of COVID-19 in Coastal Zones of Trivandrum



Department of Health and Family Welfare Government of Kerala

July 2020

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I. THIRUVANANTHAPURAM BASIC FACTS

Thiruvananthapuram, formerly Trivandrum, is the capital of Kerala, located on the west coastline of India along the Arabian Sea. It is the most populous city in India with the population of 957,730 as of 2011. Thiruvananthapuram was named the best Kerala city to live in, by a field survey conducted by The Times of India. Thiruvananthapuram is a major tourist centre, known for the Padmanabhaswamy Temple, the beaches of Kovalam and Varkala, the backwaters of Poovar and Anchuthengu and its Western Ghats tracts of Ponmudi and the Agastyamala. Thiruvananthapuram is also a notable academic and research hub and is home to the University of Kerala, Kerala Technological University the regional headquarters of Indira Gandhi National Open University, and many other schools and colleges.

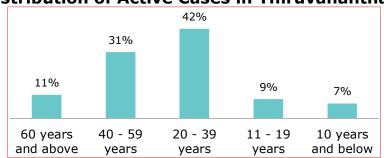
This capital city is witnessing a marked increase in the number of cases of the COVID-19 and it's vital to be vigilant and strengthen the surveillance.

Thiruvananthapuram - Basic Facts					
Area	2192 Sq. Km				
Population (2011 census)	3307284				
Population Density	1506				
Corporations	1				
Municipalities	4				
Panchayats	73				
Block Panchayats	11				
Villages	124				

II. COVID-19 - WHERE THIRUVANANTHAPURAM STANDS (AS ON 16TH JULY 2020)

Key Figures	Cumulative
Total Confirmed cases	1499
Total Active Cases	1274
Total Recovered	218
Total Deaths	0

Age Distribution of Active Cases in Thiruvananthapuram



Hospital Admission details –Tvm							
Sector	Sector 15.07.2020 Admissions Discharges Remaining						
Government	917	40	969				
Private	ate 50 13 16 47						
Total	967	105	56	1016			

COVID Hospital Status –Tvm							
HOSPITAL NO OF BEDS No of ICU ICU bed							
	BEDS	REMAINING	beds	remaining			
MCH	788	502	369	365			
GH	187	38	25	25			
SAT	88	0	10	10			

	QUARANTINE FACILITY						
TOTAL ROOMS ROOMS ROOMS INMATES AVAILABLE OCCUPIED VACAN							
GOVT	1419	2363	1196	1167			
PAID	236	606	203	314			
TOTAL	1645	2969	1399	1481			

WARD-WISE MAPS

panenayat area. **Spatial distribution of cases**Figure 1: Distribution of cases in Manacaude (Ward 72),

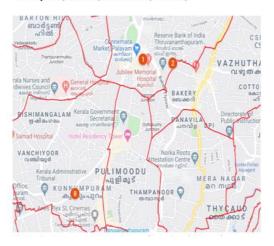
Attukal (Ward 70), Kalady (Ward 55) areas



Figure 2: Distribution of cases from Poonthura (Ward 66), Muttathara (Ward 78), Puthenpally (Ward 74)



Figure 3: Distribution of cases from Palayam (Ward 27), Vanchiyoor (Ward 82) and Pettah (Ward 93)



Clusters in Thiruvananthapuram					
Name	Status Confirmed cases		Deaths		
Attukal	Active	6	0		
Poonthura	Active	416	0		
Manacaud	Active	23	0		
Muttathara	Active	10	0		
Palayam	Active	5	0		
vizhinjam	Active	75	0		
thiruvallam	Active	16	0		
venganoor	Active	12	0		
valiyathura	Active	15	0		
azhoor GP (ward 1)	Active	1	0		
poovachal GP	Active	15	0		
Kulathoor GP (9-14)	Active	6	0		
Anchuthengu GP	Active	34	0		
chiranyinkeezhu GP (5-14)	Active	14	0		
Karumkulam GP (14-16)	Active	82	0		
panavoor GP	Active	5	0		
Kunnathukal GP (19)	Active	12	0		
Kadakkavoor (9)	Active	2	0		

VSSC (institutional)	Active	4	0
KIMS (hospital)	Active	8	0
Govt medical college	Active	12	0
saraswathy hospital parassala	Active	8	0

Clusters in Thiruvananthapuram – Summary								
	Activ		TYPE OF CLUSTERS					
Total	е	Contain	Large Limited Closed commun commun Instituti					
cluste								
rs	rs	clusters	ity	ity	ity	on		
22	22	0	14	4	0	4		

III. INTERVENTION PLAN

ZONAL STRATEGIES FOR CLUSTER CONTAINMENT

- The objective of cluster containment is to break cycle of transmission and decrease the morbidity and mortality due to COVID-19.
- A cluster is defined as 'an unusual aggregation of health events that are grouped together in time and space and that are reported to a health agency' (CDC).
- Clusters of human cases are formed when there is local transmission.
- Local transmission is defined as a laboratory confirmed case of COVID-19:
- Who has travelled from a place of known transmission (ie: Interstate /International travellers

- Who has not travelled from an area reporting confirmed cases of COVID-19
- Who had no exposure to a person travelling from COVID-19 affected area
- Less than 15 cases which are epidemiologically linked as a working definition in an area, can be treated as a cluster. There could be single or multiple foci of local transmission.
- The cluster containment strategy would be to contain the disease with in a defined geographic area
- by early detection,
- breaking the chain of transmission and thus preventing its spread to new areas

III A- Duties of the RRT(One RRT Team per Ward)

Each RRT comprises of 1) Anganwadi teacher.

- 2) Kudumbashree member
 - 3) Volunteers under the supervision of JHI /JPHN
- Active House to house surveillance daily in the containment zone from 8:00 AM to 2:00 PM.
- Preparation of line list of the family members and those having symptoms.
- Provision of a mask to the suspect case and to the care giver identified by the family.
- The patient to be isolated at home till such time he/she is examined by the supervisory officer.
- Follow up of contacts identified by the RRTs within the sector allocated to them.

 All ILI/SARI cases reported in the last 14 days by the IDSP in the containment zone to be tracked and reviewed to identify any missed case of COVID-19 in the community.

III B- Activities to be undertaken in the containment zone

Surveillance:

- Active search for cases through physical house to house surveillance by Special Teams formed for the purpose. The residential areas to be divided into sectors for the ASHAs/Anganwadi workers/ANMs each covering 20-25 or more households (30 households in difficult areas) depending upon the number of cases, geographical distribution of cases
- Testing of all cases and contacts as per testing guidelines
- Contact tracing
- Identification of local community volunteers to help in surveillance, contact tracing and risk communication
- Strict enforcement of social distancing
- Extensive IEC BCC on hand hygiene, respiratory hygiene, environmental sanitation and wearing of masks / face-coversboth interpersonal and community based
- Clinical management of all confirmed cases
- Listing of all health facilities both Govt and private and additional workforce in the containment zone of clusters
- Reporting of clinically suspect cases of COVID-19 on real time basis (including 'Nil' reports) to the control room at the district level.
- The contacts of the laboratory confirmed case/ suspect case of COVID-19 to be line-listed and tracked and kept under

- surveillance at home for 28 days (by the designated field worker).
- Supervisory officer in whose jurisdiction, the laboratory confirmed case/ suspect case falls to inform the Control Room about all the contacts and their residential addresses.
- The control room will in turn inform the supervisory officers of concerned sectors for surveillance of the contacts.
- If the residential address of the contact is beyond the allotted sector, the district IDSP will inform the concerned Supervisory officer/concerned District IDSP/State IDSP.

III C Buffer Zone :

- A Buffer Zone, a large area has to be delineated around each containment zone.
- It shall be defined by the district administration/local urban bodies with technical inputs at local level.
- Buffer zone will be primarily the area wherein additional & focused attention is needed so as to ensure that infection does not spread to adjoining areas.

III D Activities to be done in Buffer Zone

- Passive surveillance for ILI and SARI cases through the existing Integrated Disease Surveillance Programme.
- Community awareness on risk communication and preventive measures such as personal hygiene, hand hygiene and respiratory etiquettes by (i) posters and pamphlets; (ii) audio only material; (iii) AV films
- Use of face cover, social distancing through enhanced IEC activities.

To ensure social distancing by:

a. Cancelling all mass gathering events, meetings in public or private places.

- b. Avoiding public places
- c. Closure of schools, colleges and work places
 - Review of ILI/SARI cases reported in the last 14 days by the District Health Officials to identify any missed case of COVID-19 in the community.
- If any identified case of ILI/SARI, sample to be collected and sent to the designated laboratories for testing COVID-19.
- Listing of all Govt and private health facilities as a part of mapping exercise.
- All such facilities both in Government and private sector (including clinics) shall report clinically suspect cases of COVID-19 on real time basis (including 'nil' reports) to the control room at the district level.

III E -Perimeter :

- Containment Zone is delineated with the perimeter which will be defined and there would be strict perimeter control with:
- Establishment of clear entry and exit points,
- No movement to be allowed except for medical emergencies and essential goods and services,
- No unchecked influx of population to be allowed and
- People transiting to be recorded and followed through IDSP.

Perimeter control

- No unchecked outward movement of population from the containment zone except for maintaining essential services (including medical emergencies) and government business continuity.
- Existing legal acts (i) Disaster Management Act (2005) (ii)
 Epidemic Act (1897) (iii) Cr.PC and (iv) State Public Health
 Acts to be used for implementation of Containment

- To limit unchecked influx of population into the containment zone.
- At the entry points inform the incoming travellers about precautions to be taken and also to provide travellers with an information pamphlet and mask.
- All vehicular movement, movement of public transport and personnel movement to be restricted.
- All roads including rural roads connecting the containment zone to be guarded by police.
- District administration to post signs and create awareness informing public about the perimeter control.
- Health workers posted at the exit point to conduct screening (e.g. interview travellers, measure temperature, record the place and duration of intended visit and keep complete record of intended place of stay).
- Details of all persons moving out of perimeter zone for essential/ emergency services to be recorded and followed up through IDSP.

Vehicles moving out of the perimeter control to be decontaminated with sodium hypochlorite (1%) solution.

III F Laboratory support

- Identified Govt and private network laboratory, nearest to the affected area, to be further strengthened to test samples (BSL 2 following BSL 3 precautions).
- If surge of samples it should be shifted to nearby labs.
- RT PCR, Gene Xpert, TRUE NAAT, Antigen testing, either pooled sampling or individual testing of symptomatics/ comorbidities of all persons in the line list to be done.

III G Hospital care

- All suspect cases, Category A and B (without co morbidities) detected in the containment/buffer zones (till a diagnosis is made) and those tested positive to be isolated in CFLTCs
- Those who are symptomatics (Category B&C) requiring intensive care and ventilator management will be taken to COVID Hospitals.

Surge Plan: Based on the risk assessment, (data suggested an exponential rise in the number of cases), the surge capacity of the identified hospitals to be enhanced, private hospitals to be roped in and sites for temporary hospitals identified and their logistic requirements to be worked out.

- Pre hospital care (Ambulance facility) to be provided
- Clinical management, Dead body disposal and Discharge policy based on existing state guidelines
- Material Logistics
- Transportation including ambulance facility
- Stay arrangements for the Hospital and field staff

III H Capacity Building

Trainings

- Epidemiologic investigation, Field surveillance, contact tracing, data management and reporting
- Surveillance at designated exit points from the containment zone
- Sampling, packaging and shipment of specimen
- Hospital infection prevention and control including use of appropriate PPEs and biomedical waste management

Clinical care of suspect and confirmed cases including ventilator management, critical care management

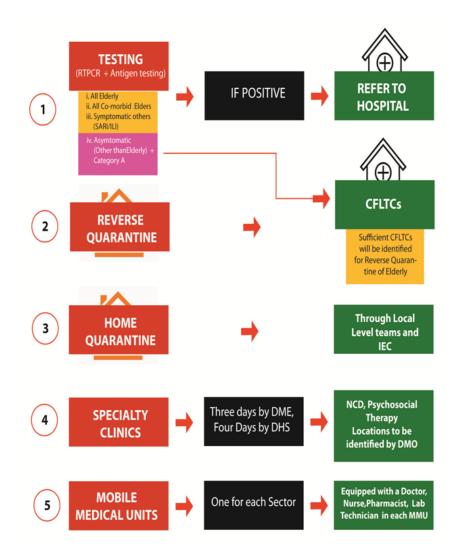
III I Scaling down of operations in clusters identified

- If no secondary laboratory confirmed COVID-19 case is reported from the containment and buffer zones for at-least 4 weeks after the last confirmed test has been isolated and all his contacts have been followed up for 28 days.
- The containment operation shall be deemed to be over 28
 days from the discharge of last confirmed case (following
 negative tests as per discharge policy) from the designated
 health facility i.e. when the follow up of hospital contacts will
 be complete.
- The closing of the surveillance for the clusters could be independent of one another provided there is no geographic continuity between clusters.
- Surveillance to be continued for ILI/SARI.
- If the containment plan is not able to contain the outbreak and large numbers of cases start appearing, then a decision will need to be taken by State administration to abandon the containment plan and start on mitigation activities.

III J Demarcation of the Coastal Zones

Coastal Zones - Thiruvananthapuram					
Zone	Number of institutions	Sector officer			
Zone 1 (Anchuthengu to Veli)	4	Deputy Director Rank officer			
Zone 2 (Veli to Vizhinjam)	3	Deputy Director Rank officer			
Zone 3 (Vizhinjam to Poovar)	5	Deputy Director Rank officer			
TOTAL	12				

Methodology and schematic representation of the strategy under the PHIs



Healthcare Institutions in Coastal Zones – Thiruvananthapuram						
Institution	Category	Zone	Population	Under 5	Above 60	
CHC Anchuthengu	CHC	1	20996	1005	2639	
PHC Perumathura	PHC	1	27033	2029	3789	
PHC, Puthukuruchi	PHC	1	53279	3854	6891	
PHC Veli	PHC	1	19500	548	5624	
Coastal Speciality, Valiyathura 24*7	SPECIALITY	2	23946	NR	NR	
CHC Vizhinjam	CHC	2	133429	7607	40000	
CHC Poonthura	CHC	2	31985	2369	1014	

CHC Poovar	CHC	3	21006	1387	3891
CHC Pulluvila	CHC	3	34828	3560	3256
PHC Pozhiyoor	PHC	3	33500	2387	
PHC Kottukal	PHC	3	36345	2054	4361
PHC Mukkola (Vizhinjam)	PHC	3	49836	3205	12138
			485683	30005	83603

III K REVERSE QUARANTINE (PARIREKSHA) CENTRE AT VALLAKKADAV

Reverse Quarantine is a key aspect in the control of Covid-19, specifically Elderly populations. Limiting the exposure of vulnerable groups to the virus is the essence of reverse quarantine. To address this, the National Health Mission in association with Kerala Social Security Mission(KSSM) established the first reverse quarantine centre (PARIREKSHA) at Sidha Hospital Vallakadav, Thiruvanathapuram with 25 beds. KSSM will support 4 doctors & 8 nurses and food for the centre through Kudumbasree. NHM posted two NHM Palliative care Nurse, one Physiotherapist, Pharmacist and other support staff. IEC campaigns like bit notice distribution, posters at public places, etc were initiated as part of this campaign.

III L Psycho Social Support in containment zones

As the number of persons in containment zones are rapidly increasing, there has been an exponential increase in psychosocial distress cases. Stress and anxiety related to fear of illness, fear of spread to family members, loneliness in isolation room, uncertainty and wait for the blood results, sleep impairment, stigma issues, depressive symptoms, timing and quantity of food, medical needs, facilities in institution are the most commonly reported psychosocial issues.

Taluk-level Quick Response Force:

- 1. Psychiatrist
- 2.Post Graduate in Psychiatry and
- 3. Psychiatric Social Worker/ Clinical Psychologist

Protocol

- The team should work in liaison with the concerned Taluk charge Medical officers.
- Should ensure psychosocial support to all persons in containment zones in the Taluk, either through telephonic consultation/ in person.
- Start medications for patients requiring pharmacological support.
- Refer patients requiring admission to Psychiatric hospitals in the district as per need.
- Clinical psychologist / Psychiatric social worker in the team should take steps to address the social issues reported by the patient.
- Share the reports to District PSS team and Taluk Medical Officer daily in the reporting format attached.

III M -e-Sanjeevani Telemedicine

The people residing in the containment zones should not be deprived of the necessary services which they require to sustain their optimum health during this hardship. When social distancing is among the major measures used to fight COVID-19 pandemic, telehealth is stepping-up as a key technology for safe and efficient communications. The World Health Organization mentioned telemedicine among essential services in "strengthening the Health Systems Response to COVID-19" policy. The state has identified the eSanjeevani platform as an opportunity to render quality medical services to the public. General OPD services are available every day from 8 AM to 8 PM.



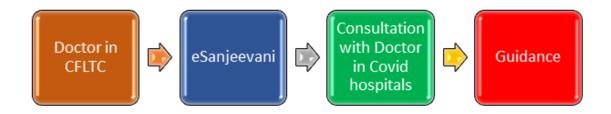
Specialty services were provided by the doctors from pioneer

institutes such as RCC, MCC, SCTIMST, IID, IMHANS. The specialty services are available during the schedule mentioned below:

- Non-Communicable Diseases (NCD) OPD: Tuesday & Thursday: 2:00 PM to 4:00 PM
- Child Development Services (CDS) OPD IMHANS: Tuesday: 10:00 AM to 12:00 PM
- Adult Psychiatry OPD IMHANS: Wednesday: 10:00 AM to 12:00 PM
- Malabar Cancer Centre (MCC) Oncology (Surgical/Head & Neck/Medical/Breast &Gynaec/ClinicalHematology/RespiratoryMedicine/Pediatric/Ra diation/Dentistry & Rehabilitation) OPD: Thursday & Friday: 3:00 PM to 4:00 PM
- Cochin Cancer Research Centre (CCRC) Oncology (Head & Neck/Medical/Gynaec/Radiation) OPD: Monday to Friday: 9:00 AM to 12:00 PM.

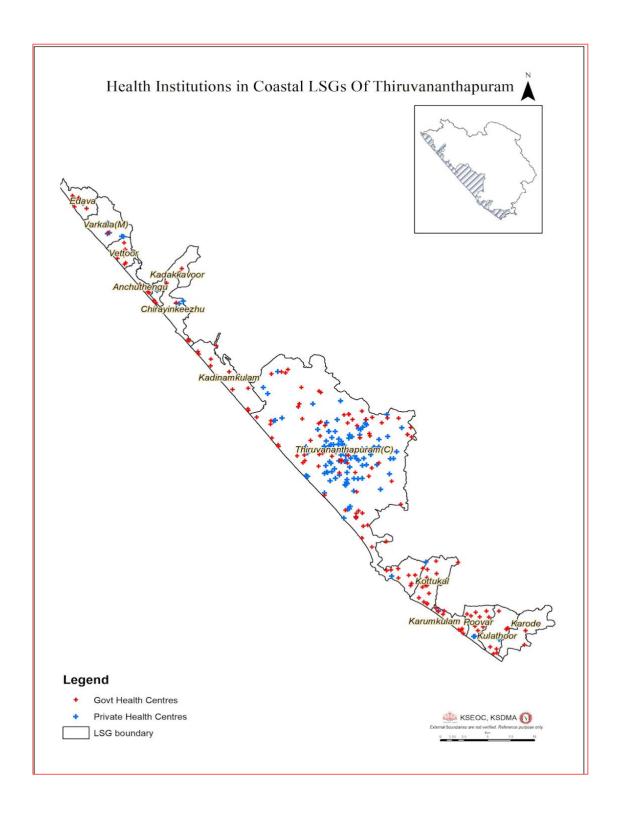


CFLTCs will be linked with MCH and GH COVID hospitals for the doctor to utilise teleconsultationservices.



ANNEXURE 1

HEALTH INFRASTRUCTURE – GOVT



	Government Health Institutions in Trivandrum												
	Number of	Tatal	Total		COVID								
Sector	Number of Institutions				COVID beds	ICU beds	COVID Ventilators						
COVID Hospital	2	3522	394	148	1008	273	148						
DME	1	1152	38	51	100	10	6						
DHS	0												
Grand total	43	8335	436	208	1160	283	154						

	Name of Institution	Total beds	Total ICU beds	Total ventilators	COVID beds	COVID ICU beds	COVID Ventilators
	COVID Hospitals			SEC	TION 1		
1	MCH Trivandrum	2750	369	135	788	248	135
2	GH Trivandrum	772	25	13	220	25	13
	Total COVID	3522	394	148	1008	273	148
	DME Hospitals			SEC	TION 2		
3	SAT Hospitals	1152	38	51	100	10	6
	Total DME	1152	38	51	100	10	6
	DHS Hospitals			SEC	TION 3		
4	GH Neyyatinkara	436	0	2	14	0	0
5	DH Nedumangad	225	0	1	9	0	0
6	DMH Peroorkada	531	0	2	7	0	0
7	TH Chirayinkeezh	243	0	1	7	0	0
8	W and C Thycaud	428	4	2	0	0	0
9	THQH Parassala	226	0	0	6	0	0
10	TH Attingal	60	0	0	9	0	0
11	THQ Varkala	64	0	0	0	0	0
12	CDH Pulayanarkotta	236	0	1	0	0	0

13	W & C	352			
14	THQH				
14	Malayinkeezhu	58			
15	TH Fort	76			
16	TH Nemom	61			
17	TH Vithura	65			
18	CHC				
	Iranimuttom	35			
19	CHC Palode	31			
20	CHC Kallara				
	SCP	12			
	CHC Vakkom	16			
22	CHC Poovar	40			
23	CHC	2.4			
	Manamboor	24			
24	CHC Perumkadavila	12			
25	CHC Vellanadu				
	CHC Vizhinjam	30			
	CHC Vellarada	30			
2/	CHC Vellarada CHC	25			
28	Puthenthopu	18			
	CHC	10			
29	Kanyakulangara	12			
30	CHC Pulluvilla	25			
2.1	CHC				
31	Kesavapuram	52			
32	CHC Vilappil	30			
33	CHC Aryanad	20			
34	CHC				
	Anchuthengu	0			
35	CHC Venpakal	52			
36	CHC				
	Andoorkonam	10			
	FHC Poonthura	24			
-	FHC Kattakada	30			
39	FHC Pozhiyoor	10			
40	FHC	14			
<u> </u>	Kunnathukal				
41	FHC	12			
\vdash	Vamanapuram FHC				
42	Balaramapuram	12			
<u> </u>			<u> </u>	<u> </u>	

43	Coastal speciality hospital, Valiyathura, TVPM	24					
	Total DHS	3661	4	9	52	0	0
	Grand total	8335	436	208	1160	283	154

SI NO	Type Of HEALTH FACILITY	Number of ICU beds	Number Ventilators	Number of Multipara monitors	Number of Pulse oxymeter	cylinders		
						Liquid Oxygen	D type cylinder	B type cylinder
01	MCH & GH	164	143	381	93	20Kilo litter	196	111
02	TH & others	00	07	100	50		30	226

SI	Type of	Number of	Number of Non	High	Number of	Number of
No	Facility	ICU	Invasive	flow	Pulse	Oxygen
		ventilators	Ventilators(CPAP &	nasal	oxymeter	cylinders(D
			BIPAP)	canula		type)
01	МСН	58	06	17	50	60
02	GH	10	01	06	15	12
02	GH	10	01	00	15	12

	Equipment Availability												
SI. N o.	Facili ty Type	Health Facility Name	BP Apparatus	Needle Destroyer	ECG Machine Single Channel	Semi Automatic Biochemistry Analyzer	Autoclave	Hematology Analyzer - 3 part	Suction Apparatus	Digital BP Apparatus	NPS	Multiparameter Monitor	ECG Machine 3 Channel
1	РНС	24X7 PHC POZHIYOOR	10	3	1	1	1						
2	РНС	24X7 PHC VALIYATHURA	15	6	1	1	1	1	3	4			
3	СНС	CHC ANCHUTHENGU	14	4		1	3		3				
4	СНС	CHC POONTHURA	5	4			1	1		3			
5	СНС	CHC POOVAR	11	5	1	3		1	2				
6	СНС	CHC PULLUVILA	7	1 3	1	2	1	1	4		3		
7	СНС	CHC VIZHINJAM	28		2	1	1	1	3			1	1
8	PHC	PHC KOTTUKAL	23	4	1			1		8			
9	РНС	PHC Mukkola	21	2						6			
10	РНС	PHC PERUMATHURA	3	3			1						
11	РНС	PHC PUTHUKURICHY	3							4			
12	PHC	PHC VELI	7	1	1								

Coastal Government Healthcare Institutions – Thiruvananthapuram

	Institution	Population	Panchayat	Sub- centers	Wards
	CHC ANCHUTHENGU	20996	ANCHUTHENGU	4	13
ZONE 1	PHC, PUTHUKURUCHI	53279	KADINAMKULAM	5	22
	PHC PERUMATHURA	53279	CHIRAYINKEEZH	5	18
	PHC VELI	19500	CORPORATION	5	100
ZONE	COASTAL SPECIALITY, VALIYATHURA 24*7	23946	CORPORATION	0	100
2	CHC POONTHURA	31985	CORPORATION	0	100
	CHC VIZHINHAM	133429	VENGANOOR	8	19
	PHC MUKKOLA (VIZHINHAM)	49836	CORPORATION	9	100
	FHC KOTTUKAL	36345	KOTTUKAL	10	18
ZONE 3	CHC PULLUVILA	34828	KARIMKULAM	8	17
	CHC POOVAR	21006	POOVAR	10	14
	CHC POZHIYOOR	33500	KULATHOOR	7	19

ANNEXURE 2 HEALTH INFRASTRUCTURE -PRIVATE

		Private	Hospit	als –	Thiruvanant	thapuram	
S No.	Name of the Hospital		No.of Beds in the Wards		No. of Ventilators	Name of the Nodal Person	Contact number
1	KIMS Hospital, Thiruvananthapuram	4	365	168	47	Dr.Deepak	9895223210
2	SreeGokulam Medical College, Venjaramoodu	8	700	105	16	Dr. Smitha Kiran	6282402336
3	NIMS Hospital, Thiruvananthapuram.	6	150	40	12	Dr.ManjuThampi	9847101301
4	PRS Hospital, Thiruvananthapuram.	34	72	35	14	Dr.Mariya	9562387418
5	Ananthapuri Hospital, Thiruvananthapuram.	110	110	80	15	Dr.Marthandan Pillai	9847062019
6	Cosmopolitan Hospital, Thiruvananthapuram.	2	74	36	0	Dr.Indu (ICO)	0471- 25121146,7510349172
7	SK Hospital, Thiruvananthapuram.	10	150	20	10	Dr Ravi	9446060843
8	CSI Karakonam	23	695	0	0	Dr. S Baburaj Dr. Shibu raj	9447154448 9446177462
9	Rukmini Devi Memorial Hospital, Vellarada	4	160	5	1	Dr. C A Mohanan	9447042027
10	SP Fort Hospital	5	15	22	4	John Sebastian	8075800508
11	Saraswathy Hospital, Parassala	5	70	18	2	Mr. Praveen.P	9447023865
12	CSI Mission, Kazhakkuttom	1		3	1	Dr.Pious	9446700106
13	SRI RAMAKRISHNA ASHRAMA HOSPITAL	10	122	3	0	Dr.SreeKumar	9447784766
14	Rollands Hospital	2	16	34	0	Dr.SanthoshRollands	9995011535
15	SivagiriSree Narayana Medical Mission Hospital	4	54	7	1	Dr. Abhilash Raman	9447386724
16	KTCT Hospital	2	200	10	0	Dr. Sabu	9446453071
17	Mamalmultispecialityhospiital	2	50	1	0	Dr Sathyanesan	9446705001
18	GG Hospital	2	10	36	6	Dr.Sayujya S Ghosh	9895403677
19	AJ Hospital, Kazhakoottam	4	100	1	2	Dr.Aeen	7034861818

						•	
20	SUT Academy of Medical Sciences	8	350	16		Dr Antony	8281625407
21	SUT Pattom	1	7	52	8	Dr Mrinal	7591900609
22	Govindan's	3	40	1	1	Dr.Carolin	8762413114
23	Al Arif	4	34		0		
24	Leela Ravi	3	20	0	0	Dr.LeelaDr. Arun	9447000780 9995122088
25	Pro Care	1	10	3	1	Jineesh Raj	0470-2838888
26	Parvathy	2	10	0	0	Dr Karthika	9947064300
27	SP Parassala	2	60	14	2	Anuraj	81119 05422
28	St. John's Pirappancode	2	80	0	0	Ajay.K	9447656065
29	Amar Maternity and Fertility Centre	2	3	12	0	Dr.P.Radhakrishnan Nair	9447162977
30	Anadiyil Hospital	0	0	0	0	Subhash John. S	9947182580
31	Jubilee Memorial Hospital	1	20	5	2	Colin	7907025748
32	LORDS HOSPITAL	0	10	6	2	Dr. C S Vijayan	9847254693
33	TSC Kazhakoottam	1	5	6	0	M.SULFIKAR	0471-2413125
34	VENAD	3	15	0	0	Dr.K.P.Ayyappan	944743971
35	SUT Mother and Child	2	10		1	Dr. Nishad	9645366479
36	SANTHWANA HOSPITAL	2	7	2	0	Mr. Gopakumar. R	9072887780
37	Shifa Medical Centre	2	20	3	0	Dr. E. Abdul Salim MS	9846046936
38	RV HOSPITAL	4	16	3	0	Dr.B.Ramachandran	9495541807
39	Nirmala Hospital, ChallaKuzhy	2	6	0	0	Dr. Abhilash	9447309774
40	MEDITRNA HOSPITAL	0	0	9	2	Dr.Achyuth	8075202495
41	Karunasai De-Addiction &Mental Health Research Institute	5	10	0	0	Dr. Veena G. Thilak	9446208133
42	GOWREESHA HOSPITAL	3	25	0	1	Sreekumar P	9447045454
43	Gitanjali Eye and ENT Hospital	1	6	2	1	Dr. Arun Nair	9446054480
44	Attukal Devi hospital	2	12	5	0	Prasanth	8289960423
45	Anupama Hospital	3	22	0	0	Dr. Arya S. Jayan	9895195207
46	AL NEYADI HOSPITAL	5	15	3	0	Swati	8129080559
1 7	Archana Hospital	1	3	0	0	Anand Rex	9567666863
48	BNV Hospital	2	8	0	0	Dr.Sudheesh	9895180410
49	Ray Mayo Clinic	1	15	0	0	Dr. Amish Ray	9496811430
			4.0				

Dr. Rani

50 Sakti Hospital

51	Samadh	1	20	0	0	Dr. Ram gopal M Pillai	9496561666
	Upasana Hospital	1	2	0	0	Dr. Amar Fettle	9447471456
	V.V. Clinic, Attingal	0	0	0	0		
	TRAVANCORE	2	10	0	0	Dr. Robert Justin Raj	9447551807
55	St. Anns Nursing Home Pettah	2	10	0	0	Sr. Lincy	8301878953
56	RK HOSPITAL MANACAUD	1	10	0	0	Dr. Yousuf	9995342189
57	PRAN FERTILITY AND WELL WOMAN CENTRE	1	6	0	0	Sarathkumar	9895863954
58	Mangala Medical Centre	0	0	0	0	Shamseena	9995360141
59	Kalyan Hospital	2	6	0	0	Dr. M.S. Thurivaryar	9847060309
60	Divya Prabha Eye Hospital	1	6	0	0	Dr. Devin Prabhaar	9746545544
61	BROTHERS MEDICAL CENTRE AND DIAGNOSTIC SERVICES	2	5	0	0	Arun	8304850354
62	Ahalia Foundation Eye Hospital	1	9	0	0		9496396701
63	CREDENCE HOSPITAL	1	6	8	2	Dr. Ashok Divakar	9072097979
64	Providence Ulloor	0	0	0	0	Ben Johnson	9447697678
65	Valsala Nursing Home	1	5	0	0	Dr. Roy Mathew	9846010620
66	M S Sarkar Dispensary	0	0	0	0	S K Sarkar	9846316661
67	WELCARE	2	8	0	0	Dr. R Ashish Parameswar	9387818222
	Wills Hospital (O P ONLY)	0	0	0	0	Dr. M.K. Wills	9496746165
	Cvc Anand Eye Hospital Clear Vision Centre (O P ONLY)	0	0	0	0	DR, Mahesh G K	9746444467
70	DR. ANUPS INSIGHT EYE HOSPITAL	1	10	0	0	Dr. Anup Das	7902990000
71	P R Medical centre	2	8	0	0	SUJITH S V	9446437887
72	KANDALA SAHAKARANA HOSPITAL	3	16	0	0	Dr. George Jacob	9447131323
	Chirayankeezhu Medical Center (O P)	0	0	0	0	Dr. C Jayakumar	9446751441
74	Anithara Hospital, Poovar	2	20	0	0	Dr. Salim	9447752837
75	Chaithanya Eye Hospital & Research Institute, Keshavadasapuram	0	0	0	0	Dr Dhanya V Nair	9020173156
76	Priya Multispeciality Dental Clinic	1	5	0	0	PADMAKUMAR S	9349911811

Dr.Agarwals Eye Hospital (O P ONLY)	1	2	0	0	Dr.Adharsh	9895145868
Jayanthi Fertility and Surgical Centre	1	3	2	0	Dr. Jayanthi	9447311047
Trinity Hospital	1	4	0	0	Dr. Akshaya Prasad	8547700834
CURE - Centre For Urological Research and Evaluation	0	0	0	0	Dr. Vinod K V	9387456700
Dr. KPR Nair, Homeopathy Clinic	0	0	0	0	Dr.Sreesankar	7012854242
Gayathri Clinic, Murukumpuzha	0	0	0	0	Dr.Beena	9495820378
Kidangoor's Clinic	0	0	0	0	Dr. Pradeep Kidangoor	9846168127
National Chest Clinic	0	0	0	0	Dr. Khader	9895147025
Nirmala Hospital,Vettukad	0	0	0	0	Dr. Sreejith	9947157775
Jabbar Sanjeevi Ayurveda Vaidyasala	0	0	0	0	Dr.Raseena	9495550204
Kaniyapuram Hospital	0	0	0	0		
Kamala Clinic (O P ONLY)	0	0	0	0	Sister Priya	9847266243
Ansar Hospital	0	0	0	0	Dr.NeelakantaSarma	9446704441
Arumana Hospital	0	0	0	0	Hari Krishnan (Manager)	9037760059
Total	337	4133	776	154		
·		4133	776	154	(**************************************	
	P ONLY) Jayanthi Fertility and Surgical Centre Trinity Hospital CURE - Centre For Urological Research and Evaluation Dr. KPR Nair, Homeopathy Clinic Gayathri Clinic, Murukumpuzha Kidangoor's Clinic National Chest Clinic Nirmala Hospital, Vettukad Jabbar Sanjeevi Ayurveda Vaidyasala Kaniyapuram Hospital Kamala Clinic (O P ONLY) Ansar Hospital Arumana Hospital	P ONLY) Jayanthi Fertility and Surgical Centre Trinity Hospital CURE - Centre For Urological Research and Evaluation Dr. KPR Nair, Homeopathy Clinic Gayathri Clinic, Murukumpuzha Kidangoor's Clinic National Chest Clinic Nirmala Hospital, Vettukad Jabbar Sanjeevi Ayurveda Vaidyasala Kaniyapuram Hospital Kamala Clinic (O P ONLY) Ansar Hospital Arumana Hospital O	P ONLY) Jayanthi Fertility and Surgical Centre 1 Trinity Hospital CURE - Centre For Urological Research and Evaluation Dr. KPR Nair, Homeopathy Clinic Gayathri Clinic, Murukumpuzha O Kidangoor's Clinic National Chest Clinic Nirmala Hospital, Vettukad Jabbar Sanjeevi Ayurveda Vaidyasala Vaidyasala Kaniyapuram Hospital Kamala Clinic (O P ONLY) Ansar Hospital Arumana Hospital O O C Arumana Hospital O O O Arumana Hospital O O O O O O O O O O O O O	P ONLY) Jayanthi Fertility and Surgical Centre Trinity Hospital CURE - Centre For Urological Research and Evaluation Dr. KPR Nair, Homeopathy Clinic Gayathri Clinic, Murukumpuzha Kidangoor's Clinic National Chest Clinic Nirmala Hospital, Vettukad Jabbar Sanjeevi Ayurveda Vaidyasala Kaniyapuram Hospital Kamala Clinic (O P ONLY) Arumana Hospital Arumana Hospital Arumana Hospital	P ONLY) 1 2 0 0 Jayanthi Fertility and Surgical Centre 1 3 2 0 Trinity Hospital 1 4 0 0 CURE - Centre For Urological Research and Evaluation 0 0 0 0 Dr. KPR Nair, Homeopathy Clinic 0 0 0 0 0 Gayathri Clinic, Murukumpuzha 0 0 0 0 0 Kidangoor's Clinic 0 0 0 0 0 National Chest Clinic 0 0 0 0 0 Nirmala Hospital,Vettukad 0 0 0 0 0 Jabbar Sanjeevi Ayurveda Vaidyasala 0 0 0 0 0 Kaniyapuram Hospital 0 0 0 0 0 Kamala Clinic (O P ONLY) 0 0 0 0 Arumana Hospital 0 0 0 0	P ONLY) 1 2 0 0 Dr.Adharsh Jayanthi Fertility and Surgical Centre 1 3 2 0 Dr. Jayanthi Trinity Hospital CURE - Centre For Urological Research and Evaluation Dr. KPR Nair, Homeopathy Clinic Gayathri Clinic, Murukumpuzha Kidangoor's Clinic National Chest Clinic Nirmala Hospital, Vettukad Jabbar Sanjeevi Ayurveda Vaidyasala Kamala Clinic (O P ONLY) Ansar Hospital Arumana Hospital O D D D Dr. Akshaya Prasad Dr. Vinod K V Dr. Pradeep Kidangoor Dr. Pradeep Kidangoor No D Dr. Rhader Dr. Pradeep Kidangoor Dr. Sreejith Dr. Raseena Dr. Pradeep Kidangoor No D Dr. Khader Dr. Pradeep Kidangoor No D Dr. Khader Dr. Sreejith Dr. Sreejith Dr. NeelakantaSarma Hari Krishnan (Manager)

> Out of these 90 private hospitals, 15 private hospitals have offered their institution for COVID patients referred by Government. The other hospitals should be on boarded at the earliest

1	KIMS Hospital, Thiruvananthapuram	4 critically ill patients and 10 mild symptom patients only
2	SreeGokulam Medical College, Venjaramoodu	10 beds, 4 ICU beds and 1 ventilator
3	Ananthapuri Hospital, Thiruvananthapuram.	6 rooms, 2 ICU beds
4	SP Fort Hospital	Nursing Hostel can be provided
5	CSI Mission, Kazhakkuttom	5 beds can be provided
6	Mamalmulti speciality hospital	willing - after august 15th they will allocate 20 beds

7	AJ Hospital, Kazhakoottam	willing to join, only limited infrastructure are there. Ready to issue 10 beds
8	SUT Pattom	5 beds
9	TRAVANCORE	Limited facilities
10	RK HOSPITAL MANACAUD	Can facilitate 100 beds separately
11	Mangala Medical Centre	15 rooms can be provided
12	Anithara Hospital, Poovar	25 beds
13	Mariyanilayam Hospital, Adimalathura	10 beds, 4 ICU beds and 1 ventilator
14	Holy Cross Hospital, Shangumugham	30 beds
15	Fathima Hospital, Thumba	15 beds

ANNEXURE 3 CFLTC DETAILS

List of CFLTCs – Thiruvananthapuram					
CFLTC	Level	COVID hospital	CFLTC Beds	Nodal officer	Contact number
Govt Homeo Medical College	Level 1	GH Thiruvananthapuram	70	Dr. Sajeev	9074271007
CSI Med.Clgkarakkonam	Level 1	MCH Thiruvanthapuram	150		
SR Medical college Varkala	Level 1	GH Thiruvananthapuram	300	Dr. Ziyad	9847444552
IMG	Level 1	GH Thiruvananthapuram	94	Dr. Anoop	9400643477
SUT Hospital Vattappara	Level 1	MCH Thiruvanthapuram	250	Dr.Harikrishnan	9605818515
St Thomas Hr Sec Poonthura	Level 2	GH Thiruvananthapuram	110	Dr. Jyothi	9446064418
G V Raja	Level 2	GH Thiruvananthapuram	48		
College of Agriculture hostel Vellayani	Level 2	THQH Malayinkeezhu	100		

	5 5		1262	
Sree Krishna College of Pharmacy Parassala	Level 2	THQH Parassala	100	
SN Training College Nedukandam	Level 2	CHC Anchuthengu	40	

ANNEXURE 4 HEALTH POSTS – COVID AND NON-COVID MANAGEMENT

a) **Scope:**The purpose of this document is for the protection of vulnerable groups like Elderly, Persons with Comorbidities, Pregnant women, Children less than 5 years & Migrants and also to ensure COVID 19 control to ensure that all stakeholders have the same understanding of the risks they face in view of COVID 19 and to ensure these high risk groups receive adequate support in all situations when required. In that respect, the SOPs define the roles, responsibilities and procedures in making decisions about the high-risk groups and provide a common basis for all stakeholders on how to identify and determine priorities for response and support.

Serial no	Vulnerable groups	Vulnerability factors	Stake holders
1	Elderly	Sensitivities related to medications they may be taking, immune response, and physiology	Dept of Health, Dept of Social Justice
2	Persons with comorbidities & Immunocompromised	Exacerbation of existing comorbidities, need for replenishment of Medicines & other medical supplies	Dept of Health
3	Pregnant women	Pregnant women with High risk pregnancy, Regular check-ups, any medical or surgical emergencies, Immunisation, Transportation for delivery	Dept of Health, Social Justice
4	Infants & Children less than 5 years	Malnutrition, Co morbidities, Immunisation, any medical or surgical emergencies	Dept of Health, Social Justice
5	Migrants	Poor housing quality, overcrowding, Malnutrition, lack of earnings, history of	Dept of Labour, Dept of Health

		travel, increased risk of Malaria, reduced adaptive capacity, language issues	
6	Malnourished children	May worsen comorbidities, Immunisation	Dept of Social Justice, Dept of Health

Serial no	Vulnerable groups	Total numbers
1	Elderly	83,603
2	Persons with comorbidities & Immunocompromised	3478
3	Pregnant women	2507
4	Infants & Children less than 5 years	30,005
5	Migrants	-117(migrant children)
6	Malnourished children	-

b) Strategy for Implementation

Plan of action : Sub Centres are identified as the basic unit for management of Cluster control & High risk groups.3-4 member Rapid Response Team groups are to be formed comprising Anganwadi teachers, Kudumbashree members and Volunteers under the supervision of JHI /JPHN. These Task forces are to be formed at the ward level. Transportation facility in emergency situations needs to be arranged by funds from the Local Self Government /ward level sanitation committee or any other funds earmarked for COVID 19 Control.

Since each sub centre comes under a Primary health centre /CHC, the Medical officer in charge of these PHC/CHC will function as the convener of the Special task force groups and President of the concerned Local Self Government as the Chairman of the committee. Other departments of the concerned LSG'S , NGO's, Private health institutions and other stakeholders will be functioning as members and will be actively involving in the daily COVID 19 control activities and the management of high risk groups in the

Reporting:Reporting of activities related to Cluster control/high risk population to be compiled by Dept of Health and to be send daily to concerned departments

Serial no	Vulnerable groups	Total numbers	Special task force for monitoring
1	Elderly	83,603	Anganwadi teachers, Kudumbashreemembers , volunteers
2	Persons with comorbidities & Immunocompromised	3478	Anganwadi teachers, Kudumbashreemembers , volunteers

3	Pregnant women	2507	Anganwadi teachers, Kudumbashreemembers , volunteers
4	Infants & Children less than 5 years	30,005	Anganwadi teachers, Kudumbashreemembers , volunteers
5	Migrants	- 117(migrant children)	Anganwadi teachers,Kudumbashree members , volunteers
6	Malnourished children	-	Anganwadi teachers, Kudumbashree members, volunteers

c) Management of Non-COVID healthcare

Essentials of NON COVID management are:

- Management of communicable diseases, particularly vaccination;
- > Services related to reproductive health, including care during pregnancy and childbirth;
- Care of vulnerable populations, such as young infants and older adults;
- Provision of medications and supplies for the ongoing management of chronic diseases, including mental health conditions;
- Continuity of critical inpatient therapies;
- Management of emergency health conditions and common acute presentations that requiretime-sensitive intervention;
- Auxiliary services, such as basic diagnostic imaging, laboratory services, and blood bankservices;

d) Plan of Action for NON COVID diseases:

Vector borne diseases like Malaria, Chikungunya, Dengue, Japanese Encephalitis are a threat to human health. High/medium turbid coastal lagoons and inland water-logged wetlands with aquatic vegetation have significant effect on the incidence of chikungunya while dengue is influenced by high turbid coastal beaches and malaria by medium turbid coastal beaches. The high turbidity in water is due to the urban waste discharge namely sewage, sullage and garbage from the densely populated cities and towns. The large extent of wetland is low lying area favours the occurrence of vector borne diseases.

Other diseases like Leptospirosis & Acute Diarrhoeal diseases which show an increasing trend in the rainy season along with Vector borne diseases too add to the disease burden of the coastal community. In view of the present COVID 19 clusters seen along the coastal regions of Trivandrum, huge burden has befallen on the health team for management of COVID and Non COVID diseases.

Health team of the Govt Health Institutions also has to manage Non COVID cases along with COVID 19 cases.RRTTeam of Multipurpose workers (JHI/JPHN) and ASHA's under the supervision of HS/PHN/HI/LHI is required to conduct regular vector surveys, Integrated vector management, Chlorination of wells, Rodent control measures and continuous behavioural change communication in the zones identified in coastal regions to prevent morbidity and mortality due to Non COVID illness.

Sub Centres are considered as the basic unit of activities. Ward health sanitation committees are to coordinate the NON COVID activities of a particular ward. Asha's will coordinate the activities of the Ward health sanitation committee with other departments. Asha's will be assisting the field staff in NON COVID control activities. Outbreak investigation, Death investigation must be done promptly in COVID 19 Clusters and in all deaths due to non COVID, mandatory COVID test must be done.

e) Reproductive, Maternal, New Born, Child and Adolescent Health services

1.Ante natal services

- a. Routine Antenatal Care services
- ➤ Pradhan Mantri SurakshitMatritva Abhiyan (PMSMA) and Village Health, Sanitation andNutrition Day (VHSND) activities, which involve large gathering of beneficiaries could besuspended in view of restricted movements and the need for physical distancing.
- > ANC services are to be provided on walk in basis as per standard protocols at the Institution level following physical distancing norms.
- > Availability of TD/ IFA/ Calcium during ANC period to be ensured
- b. High-risk pregnancy (HRP) tracking and follow up
- > JPHN's and ASHAs to list and follow up high risk pregnancies to ensure early detection of complications, referral and follow up.
- > ANCs during the last trimester should be prioritized. Telephonic contact should be made by ASHAs / JPHN's to High risk pregnancies during last trimester to ascertain status and home based follow up to be provided if necessary. (ASHAs / JPHN's to follow all precautions while visiting the household).

2. Intrapartum Services

- Ensuring safe institutional delivery-
- ➤ The due list of all pregnant women with Expected Date of Delivery (EDD) up to next threemonths (last trimester) should be maintained at PHC level for active follow up.
- > Ensure availability of Misoprostol and disposable delivery kits for clean deliveries at homewith ASHAs, if needed, but encourage appropriate referral forinstitutional delivery.

- ➤ Each pregnant woman to be linked with the appropriate health facility for delivery (as perantenatal status and doctor's advice) by the JPHN / CHC/PHC MO.
- >Identification of BeMONC centres for referral of high risk pregnancy and list of such institutions to be communicated for referral of high risk pregnancies
- > Availability of dedicated ambulances for COVID and non-COVID patients must beensured at the district/ block level. Non-COVID patients must be transferred in non COVID ambulances only.
- ➤ All Blood banks/Blood Storage Units need to be kept functional.

3. Postpartum and new-born care:

- Ensure availability of IFA and calcium tablets during PNC period.
- In case of home deliveries, immediate visits to be made by JPHN/ASHA or Medical officer to assess the health of the woman and new-born. Timely referral in case of any

complication should be facilitated using the dedicated non-COVID ambulances.

4. Family Planning Services and Safe Abortion services

- ➤ Contraceptives (Condoms/ Oral Contraceptive Pills MALA/Chhaya, InjectableContraceptive Antara /Emergency Contraceptives) are to be provided to eligible couples /others needing them through all Public Health Facilities, including through ASHA/Field staff and PHC for easier access.
- ➤ Information about delayed availability of IUCDs and sterilization services until routineservices resume should be displayed at all health facilities. Beneficiaries must becounselled for adoption of contraception and provided with temporary methods of othercontraception methods like Condoms / OCP/ injectable etc. in the interim period.

> Medical and surgical abortion services should be ensured at appropriate facility level, withappropriate infection prevention measures including counselling for post abortion care and provision of contraception.

5. Child Health

a. Immunization services (including for pregnant women)

- > Birth doses for institutional deliveries to continue uninterrupted as these beneficiaries arealready in the health facilities.
- > Immunization services are to be provided at facilities wherever feasible, for walk-inbeneficiaries.
- > Every opportunity is to be utilized for vaccinating beneficiaries if they have alreadyreported at facilities. Subsequent vaccination could be provided at PHC or in additional outreach sessions.
- Fixed site vaccination and VPD surveillance should be implemented while maintaining physical distancing measures and taking appropriate infection control precautions.
- > Catch-up vaccination should be conducted as soon as the restriction is eased. This willrequire tracking and follow-up with individuals who missed vaccinations.
- > Mass vaccinations should be avoided.

b. New-born care and childhood illness management

- ➤ Home-based new-born care visits to be continued as per schedule by ASHAs following COVID 19 precautions along with visits of RRT. Adequate and appropriate COVID protective equipment should be provided to ASHAs to protect themselves and to prevent infecting others.
 - Breast feeding practices are to be promoted with early initiation of breast feeding and Kangaroo Mother Care as per MAA/KMC guidelines.

- > Admission to SNCU and NBSU are to be continued as per existing guidelines.
- > ASHAs may contact the family telephonically to assess health statusof the child, especially for cough, cold, fever, breathlessness and diarrhoea. In case of anycomplication in new-born or young child, ASHAs should consult PHC MO forappropriate referral and management advice.
- ➤ Adequate supply of ORS, Cotrimoxazole, Gentamycin, and Amoxicillin at the PHC/CHC,including HWCs should be made available.
- ➤ In case of suspected COVID-19 infection in children, they should be referred to thenearest COVID-19 management facility.
- c. Management of SAM children
- > SAM children with medical complications should be referred to nearby healthfacility (PHC/CHC) for medical management. For secondary care, the PHC/CHC –Medical Officer may refer the sick SAM children to the DH/Medical college.
- > Previously admitted children who are stable and have entered rehabilitation phase may be discharged early with appropriate feeding advice, and provided with oral antibiotics, and supplements except Potassium Chloride (Potklor) and Magnesium.
- > For children who cannot be discharged, appropriate infection protocols to be maintained.
- > List of SAM children (discharged from NRC) to be shared with Anganwadi centres forprioritizing home-based delivery of Take Home Ration.
- > Follow up needs to be done telephonically and only children with medical complications should be called for physical follow up.

d. Adolescent Health

Threemonth supply of weekly iron folic acid supplementation tablets may be dispensed by ASHAs /AWWs for community distribution to adolescent boys and girls.

II. Communicable Diseases

1. Vector Borne Diseases

- > Activities such as distribution of Insecticide Treated Nets (ITN) could be postponed tillafter the lockdown.
- ➤ Targeted Indoor Residual Spraying (IRS) in high risk vector borne diseases endemicareas or wherever increase in cases is seen, may be undertaken, in targeted areas after thelockdown. IRS teamsshould use full personal protective equipment and usesanitizers/soap and water at all operation sites.
- > Enhanced fever surveillance and use of rapid diagnostic kits for malaria diagnosis shouldbe undertaken.
- ➤ Care should be taken to watch for rise in admissions in dengue cases especially in urbanareas where antilarval measures can be undertaken and integrated with the COVID19surveillance.

2. Tuberculosis

- ➤ List of all TB patients should be maintained at the PHC/ SHC level.
- > Delivery of DOTS to TB patients through ASHAs/ Field staff/ volunteers to be ensured, closer to the community, with minimum or no travel.
- > Routine screening for presumptive TB cases to continue at primary level facilities withdiagnostic services to be provided uninterrupted at designated facilities as per advisoriesissued by National Tuberculosis Elimination Programme.
- > Screening for new onset fever/cough/breathlessness and risk communication on COVID19

3. Leprosy

> Ensure that all Leprosy patients are with provided uninterrupted drug supplies throughField staff,ASHAs), to ensure continuity of treatment.

4. Viral Hepatitis

- > Patients on antiviral treatment for hepatitis to be dispensed with medicines for 1 monthduring the period of restriction.
- > A list of patients undergoing treatment for Hepatitis C to be submitted to the districtadministration so that patients/attendants can collect the medicines during the timerestrictions are in place or for the duration of the outbreak. Alternativelymedicines to be made available to the patients, through ASHAs, Field staff, volunteers

5. HIV

- > ART centres are to be provided with sanitizers, masks and other protectionEquipment for PLHIV and healthcare staff.
- > Uninterrupted supply of Anti-retroviral drugs to PLHIV, through decentralized drug dispensation, online counselling, telemedicine guidance, information, education, and communication (IEC) material through social media apps, etc.
- >One month dispensation of ART could be provided through Antiretroviraltreatment (ART) centre, Link ART centre or facilityintegrated ART centre.
- ➤ Enable peer educators (PEs) and out-reach workers (ORWs) underNACP to provide multi-week (2-3 week) dispensation of commodities such ascondom, needle and syringe, etc. to High Risk Groups during the period oflockdown/restrictions.
- ➤ Community dispensation of commodities (through Care and Support Centres, home delivery through out-reach workers, volunteers, PLHIV networks) and family dispensation, could also be allowed.
- ➤ In case of all PLHIV coming to ART centres, triage of symptomatic PLHIV(with fever/cough/shortness of breath/other

respiratory symptoms) should be prioritized while maintaining appropriate physical distancing and other protective measures.

III. Non-Communicable Diseases

- > Hypertension, Diabetes and other NCDs like COPDs- All known/ diagnosed patients of Hypertension, Diabetes, COPD and mental health to receive regular supply of medicines for upto one month through ASHAs or RRT's on prescription.
- ➤ Dialysis and Cancer Treatment services To ensure uninterrupted availability ofdialysis and cancer treatment services. Allow easy movement of these patients to access care. In case of patients, who cannot afford private vehicles, RBSK vehicles can be used for facilitating transport of patients. This can be coordinated by the PHC team, who can prepare list of such patients and work with District hospitals to organize appointments via telephone during period of lockdown.
- ➤ Care for elderly/ disabled and palliative care patients List of patients/ individuals whoneed extended support to be maintained at the PHC/CHC level for regular follow up. RRT teams /ASHAs to maintain telephonic contact with these patients and their families. Screening for new onset fever/cough/breathlessness and risk communication on COVID-19 in this sub group should be undertaken.

> Blood disorders

- a. Services for patients with blood disorders- thalassemia, sickle cell diseases, andhaemophilia need to be ensured.
- b. Blood transfusion needs to take place at regular intervals and iron chelation should becontinued, with ferritin level and CBC checked. The requisite units required for transfusionmust be communicated to the blood bank in advance (preferably three days), andavailability of blood verified.
- c. Requests for scheduled patient transfusions should be sent early, to avoid long waitingperiods. Thalassemia and sickle cell disease

patients could enter their requirement of bloodin e-raktkosh, specifying a blood unit and particular hospital blood bank.

e. Patients requiring blood transfusion or (Anti haemophilic factor) infusion should beadvised to also carry their identity cards, hospital approval, and outpatient cards tofacilitate easy movement. Hospitals can issue passes for these patients.

ANNEXURE 5MATERIAL AND SUPPLIES

Stock position of Personal Protective Gears in the Critical Coastal Zone

SL	INSTITUTION	PPE KIT	N95 MAS	3L MASK	FACE SHIELD	HAND SANITIZER
NO	NAME	ISSUED QTY	ISSUED QTY	ISSUED QTY	ISSUED QTY	ISSUED QTY
1	CSH VALIYATHURA	26	315	535	15	45
2	CHC ANCHUTHENGU	180	550	1250	60	80
3	CHC POONTHURA	560	550	3342	195	169
4	CHC POOVAR	145	200	4650	65	742
5	CHC PULLUVILA	87	425	2250	60	180
6	CHC VIZHINJAM	71	197	2512	100	162
7	PHC POZHIYOOR	43	190	950	12	120
8	PHC KOTTUKAL	7	25	250	10	20
9	PHC MUKKOLA VIZHINJAM	10	160	700	30	110
10	PHC PERUMATHURA	85	220	1000	25	80
11	PHC PUTHUKURICHY	100	210	500	14	60
12	PHC VELI	15	115	750	50	50

District Stock position of the Critical commodities

SI. No	District	Institution	PPE KIT	N95	Triple layer	Hand Rub solutions	Gloves Sterile 7"
		WH	7,609	12,664	29,200	16,262	3,32,450
1	Trivandrum	DHS	11,620	5,998	16,380	9,881	1,79,242
1	Trivaliuruiii	DME	8,831	6,694	26,665	4,338	90,949
		OTHERS	1,600	3,950	4,800	906	6,000
	то	TAL	29,660	29,306	77,045	31,387	6,08,641

The mode of operation adopted by the KMSCL in the logistics & supply chain management for Personal Protective gears shall be through Hub & Spoke model.

The point of contact will be the District Drug warehouse Manager, Tvm: Sri Manoj Kumar R. (04712470222/09496003900)

STO	STOCK DETAILS OF ITEMS AVAILABLE WITH COASTAL CRITICAL ZONE HOSPITALS						
SI.No	Institution Name	Indent Value	Issue Value	Current Stock Value			
1	24X7 PHC, Pozhiyoor(TSP)	42,69,692	8,19,293	15,91,975			
2	CHC, Anjuthengu	21,07,188	4,40,155	11,27,451			
3	CHC, Poonthura	41,82,103	18,45,455	25,88,094			
4	CHC, Poovar	30,74,842	8,48,676	16,46,595			
5	CHC, Pulluvila	51,36,424	7,66,056	21,47,412			
6	CHC, Vizhinjam	53,29,765	17,09,008	27,21,090			
7	CSH, Valiathura	34,75,064	14,13,904	19,21,422			

8	PHC, Kottukal	10,00,114	1,65,580	4,23,330
9	PHC, Mukkola	10,42,820	3,39,276	4,56,316
10	PHC, Perumathura	6,40,979	1,17,573	3,00,336
11	PHC, Puthukurichy	10,40,530	2,45,866	1,73,478
12	PHC, Veli	8,30,335	1,71,941	2,65,243

Additional Drug to be purchased:

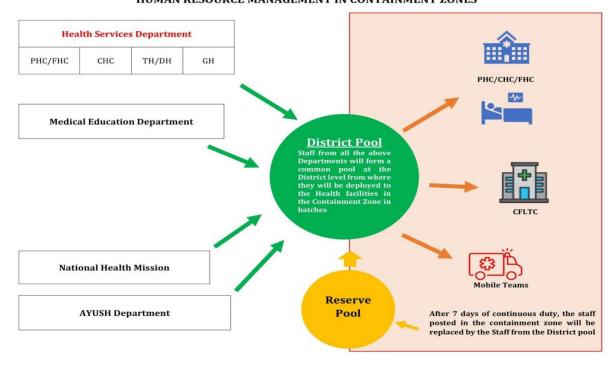
- Injection Tocilizumab
- Dosage 8mg/Kg single dose of 400 mg per patient)
- Projected requirement for 800 patients(assumption: -1% of the Elderly patients may be critically ill)
- Unit cost: 6291.60/- for 80 mg Vial
- Expenditure 2.51 Crore

Mobile Medical Units (MMU):

- In all the three critical costal zones three(03) Mobile Medical Units cum pharmacy has to be set up through NHM
- The Mobile Medical Units cum pharmacy shall be stationed at CHC Pullluvila, CHCAnchuthengu& CHC Poovar as base location.
- Each MMU shall have one Doctor ,Staff Nurse & Supportive staff .
- Each MMU shall do the home based medical care to all households in the critical containment Zone by doing the assessment of biophysical parameters including pulse oximetry.
- The MMU shall also function as the mobile pharmacy & provide Drugs also to the needed.
- KMSCL shall replenish the drugs in the MMU through reverse milking strategy
- The MMU shall offer the referral services too if needed
- Contact Person: Sri Manoj Kumar R(District Drug warehouse Manager)-04712470222/09496003900.

ANNEXURE 6 HRMANAGEMENT

HUMAN RESOURCE MANAGEMENT IN CONTAINMENT ZONES



17 Institutions have been identified in the coastal belt in Thiruvananthapuram. The current staff strength of Doctors, Staff Nurse, Lab Technician and Pharmacist available in these institutions has been documented in a tabular form.

Institutions	Staff	Details
1.FHC Kottukal	Doctors	Drs 2 PSC+1LSGD
1.FIIC KULLUKAI	Staff Nurse	2 PSC+2 LSGD

	Pharmacist	2
	Lab technician	1PSC+1 NHM
	Doctors	2 PSC+3 NHM
	Staff Nurse	2
2.PHC Mukkola	Pharmacist	1
	Lab technician	1
	Doctors	PSC-2, RP-3
	Staff Nurse	PSC-1,NHM-1
3. PHC Veli	Pharmacist	1
	Lab technician	1
	Doctors	2 PSC+ 2 RP
4. PHC	Staff nurse	PSC-1+ 1 NHM
Perumathura	Pharmacist	1
	Lab technician	1
	Doctors	2 PSC,1 Intern Dr Shahim- 9539119453 Dr Shajahan Rabu Mol
5. PHC Vettoor	Staff nurse	2
	Lab technician	HMC-1
	Pharmacist	1
	Doctors	3 PSC+1 RP
	Staff Nurse	2
6. PHC Edava	Lab technician	1HMC
	Pharmacist	1PSC
	Doctors	PSC-3, 2 NHM Charge MO- Dr Sabu : 8547233361
7. PHC Pozhiyoor	Staff Nurse	PSC-3, NHM-1, HMC-1
	Lab technician	HMC-1
	Pharmacist	2: 1 PSC, 1 HMC
	Doctors	4PSC+2 NHM

	Staff Nurse	5
8. CHC	Pharmacist	1-PSC, 2 NHM
Puthenthopu	Lab technician	1PSC+1 NHM
	Doctors	PSC-4, NHM-1, Rur P-2
9. CHC	Staff Nurse	PSC-1, Others-2
Anchuthengu	Lab technician	1
	Pharmacist	
	Doctors	4-PSC, NHM-2, COVID-1, Post Interns- 2
10. CHC Poovar	Staff Nurse	PSC1, NHM-4, COVID-1
To. Cric i ooval	Lab technician	2 PSC, 2 HMC
	Pharmacist	1 PSC, 1 HMC, 2 LSGD
	Doctors	4 PSC+ 13 Others
11. FHC	Staff Nurse	1 PSC+4+2
Poonthura	Pharmacist	PSC-1, Others -2
	Lab technician	PSC1+1
	Staff	Details
	Doctors	PSC-3, NHM-3, RP- 1,
12.CHC Pulluvila	Staff Nurse	PSC- 1, SN -4
	Lab technician	1 PSC, 1 NHM
	Pharmacist	1 PSC, 1 NHM
	Doctors	PSC-5, NHM-3, Dent Surg-1
13.CHC	Staff Nurse	7
Vizhinzham	Lab technician	PSC-2, NHM-1,Others 3
	Pharmacist	1 PSC, 1NHM,1 HMC
	Doctors	2
14 PHC	Staff Nurse	2
PuthuKurissey	Pharmacist	1
,	Lab technician	1

	Doctors	4 Asst Surg+2 Pead+ 2 Gynaec+1 Dent Surg+ 1 Anaesthetist+2 NHM+ RP-4
15. ValliyathuraSpl	Staff Nurse	7 PSC+ 3
Hospital	Lab technician	2
	Pharmacist	1 PSC+1 NHM
	Doctors	18 PSC+2 NHM
	Staff Nurse	18 SN
16. TH Varkala	Lab technician	2 PSC+4 HMC
	Pharmacist	2 PSC+4 others
	Doctors	26 PSC+ 4 Others
17. TH	Staff Nurse	10 Head Nurse+ 30 SN+ 1 Spl Rec+ 10NHM+7 Others
Chirayinkeezhu	Pharmacist	6 PSC
	Lab technician	5PSC+10 NHM+1 HMC

HR Availa	HR Availability - Thiruvananthapuram					
Category	Health Service	NHM PIP	NHM Additional HR	Others	Total	
Civil Surgeons & Assistant Surgeons	295	99	138	13	545	
CMOs	50				50	
Speciality Doctors	285	9			294	
Dental Civil/Asst Surgeons	13	6			19	
Rural Posting Doctors	128				128	
Head Nurse	196				196	
Staff Nurse	829	207	310	75	1421	
Pharmacist	187	8	40	71	306	
Lab Technician	175	40	71	90	376	
Nursing Assistant	650			9	659	
Hospital Attendent Gr1 &2/ Cleaning Staff	691		282		973	

Rotation plan for Coastal Belt Institutions

The rotation plan for Doctors has been worked out by pooling of Human Resources from the Community Health Centers, Family Health Centers and Primary Health Centers. 128 Doctors has been issued rural posting orders. As apart of their rural Service they may be posted on a rotation basis to coastal areas.

The staff nurses posted through LSGD may support the respective institutions and staff nurses posted through PSC and NHM in FHCs/PHCs/CHCs may be posted in a rotation basis in coastal areas

As the posts of Pharmacists and Lab technicians are difficult to be spared from PHC/CHC/FHC level, 4 pharmacists for shifts B and C may be taken from major institutions, the rest may be met through NHM.

Rotation Plan for Coastal belt institutions				
	А	В	С	
Doctors: 600 Drs* (500 Asst Surg+ 100 Rural Posting Doctors)	110	110	110	
Staff Nurses**	63	63	63	
Pharmacist	28	24 (Required)	24 (Required)	
Lab Technician	28	28	28 (Required)	

CREATE MAKE SHIFT HOSPITAL AT PULLUVILA AND STRENGTHENING SPECIALITY HOSPITAL VALIYATHURA

COVID 19 outbreak is progressing to community transmission along the southern coastline of the State. The coastal belt of Trivandrum District is identified as critical containment zone and triple lockdown is imposed in these areas after dividing it into three geographical zones. The general population in these areas are expected to remain within their residences and are strictly prohibited from leaving their concerned zones. In light of the above mentioned situation, the basic amenities for this population will have to be provided at their doorstep. One among these amenities is the Healthcare services which could be looked after only through our

department. Though COVID response activities are given the prime importance, non-COVID essential medical, surgical and obstetric services cannot be denied. Thus, adequate facilities should be arranged in such centres in each zone, which are easily accessible to the respective populace.

Present Situation

At present we have a community health centre at Pulluvila and a coastal specialty hospital at Valiyathura which are at appropriate centres. the CHC Pulluvila is having skeletal staff providing primary healthcare services. No specialty services are available in this zone at present. The CSH Valiyathura is a specialty hospital where, apart from Primary Healthcare, specialty services like obstetric and paediatric services are delivered.

Objective of the Proposal

- Provide essential healthcare services to the population in the containment zones in the coastal region of Trivandrum District, under triple lockdown
- Provision of essential Medical, Obstetric and Paediatric services to the abovesaid population
- Provision for appropriate and timely referral of complicated cases.

Facility requirements

Two specialty healthcare facilities are proposed one in Pulluvila and the other in Valiyathura. Each such centre should have facilities for providing basic specialty services. Separate OP rooms shall be arranged for each of the 3 above mentioned specialties and one OP room for General OP. Examination room, Procedure room, Pharmacy, treatment room, wash room and store room shall be arranged. An Observation room and male and female wards may preferably be arranged. A labour room shall be setup. Basic facilities like uninterrupted water supply, electricity and drainage should be ensured. The facility should be easily accessible by ambulance. Residential facilities should also be provided to the staff deployed to

these facilities. The LSGI shall be given the responsibility for identifying the facility and providing all the basic amenities in consensus with the charge medical officer of the existing healthcare facility (CHC Pulluvila or CSH Valiyathura)

Administration

The charge medical officer of the existing healthcare facility (CHC Pulluvila or CSH Valiyathura) shall be responsible for the overall administration of the facility.

Services provided

Two specialists from each specialty, one Anaesthetist and four general cadre doctor may be posted in each such centre for a period of 10 days. Complicated cases may be referred to higher centres outside the containment zones only after attended by the concerned specialist.

Human Resources

Specialists from existing healthcare institutions in the district need to be deployed to these facilities for a period of 10 days per turn. Doctors from the private sector, residents from medical colleges and specialists from ESI department also may be utilised. Four nurses, two pharmacist, two lab technicians, three cleaning staff may be posted . All staff should strictly practise all infection control practices. The deployed staff will have to stay in the residential facility provided in the vicinity of the facility. After a duty period of 10 days , one week duty off may be provided to the team and a new team shall be posted.

HR Requirement - Speciality Facilities					
Category	Description	HR for 1 month for 1 institution	HR needed for 2 institutions		
Physician	1 Asst Professor from MCH 1 Physician from Health Services	6 (3 from MCH and 3 from Health Service)	12		
Peadeatrician	1 Asst Professor from MCH	6 (3 from MCH and 3 from Health Service)	12		

	1 Physician from Health Services		
Gynaecologist	1 Asst Professor from MCH 1 Physician from Health Services	6 (3 from MCH and 3 from Health Service)	12
Anaesthetist	1 Asst Professor from MCH	3	6
Medical Officer/Residents	2 from MCH and 2 from Health Services	12	24
Staff Nurses	2 from MCH and 2 from Health Services	12	24
Pharmacist	2	6	12
Lab Technician	2	6	12
Cleaning staff	3	9	18

ANNEXURE 7

EXPERT HEALTH TEAM VISIT

- The Critical containment Zone shall have expert team visit by the experts from Medical College & General Hospital, Trivandrum on alternate days to ensure the comprehensive care for the Non COVID health issues & to give supportive supervisory suggestions to the MMU team
- The expert team will have Physician, Surgeon, Gynecologist
- There should be psychiatric review fortnightly

Schedule of visit

1st**& 3**rd**Monday :-** Gynecologist from Medical College

1st& 3rdWednesday:- General Medicine expert from Medical

College

1st & 3rd Friday: - Surgery expert from Medical College

2nd& 4thMonday :- Gynecologist from W& C Thykkadu

2nd& 4th Wednesday :- General Medicine expert from GH TVM

2nd& 4th Friday:-Surgery expert from GH Tvm

ANNEXURE 8 HEALTH DIRECTORY

	Health Directory				
SI. No	Designation	Name	Phone No		
1	Honorable Minister for Health and Social Justice	Smt K KShylaja Teacher	9447694326		
2	Principal Secretary Health	Dr Rajan Khobragade IAS	9072628100		
3	SMD NHM	Dr RathanKelkar IAS	9483899911		
4	Joint Secretary Health	Dr Sriram Venkitaraman IAS	9048027777		
5	Director of Health Services	Dr Sarita RL	9447139266		

6	Project Director KSACS	Dr Ramesh R	9446332633
7	Additional Director Administration and Training	Dr Sameera A	9447525157
8	Additional Director TB	Dr Parvathy A P	9447424678
9	Additional Director Planning	Dr V R Raju	9400355719
10	Additional Director Medical	Dr Bindhu Mohan	9447343238
11	Additional Director Public Health	Dr V Meenakshi	9946102860
12	Additional Director Vigillance	Dr Muraleedharan Pillai	9447136608
13	Additional Director FW I/c and State Program Manager	Dr V R Raju	9400355719
14	Director PH Lab	Dr Sunija	9995429758
15	Principal SIH&FW and Executive Director SHSRC	Dr Shinu K S	9447069900
16	Deputy Director FW	Dr Sandeep K	9946105461
17	Deputy Director Planning	Dr Jagadeesan C K	9447124413
18	Deputy Director Opthalmology I/C	Dr Jagadeesan C K	9447124413
19	Deputy Director Medical	Dr Santha K K	9446221118
20	Deputy Director NVBDCP	Dr Sindhu M D	9447161523
21	State Leprosy Officer/DD PH	Dr Vidya KR	9446764488
22	Deputy Director- Clinical Establishment	Dr Sanil Kumar	9447701262

23	Deputy Director Dental	Dr Simon Morison	9995919664
24	Asst Director- State NCD Nodal Officer	Dr Bipin K Gopal	9447001934
25	Asst Director ORT	Dr Manjula Bhai N S	9447494937
26	Asst Director PH	Dr Sheela S	6282123803
27	Asst Director Planning	Dr H Veena Saroji	9447819437
28	JAMO FW	Dr Anoj S	9447335860
29	JAMO A& T	Dr Suja S R	9495903797
30	JAMO PH	Dr Sindhu Sreedhar	9747853036
31	JAMO Planning	Dr Ajan M J	9496337143
32	Medical Officer T B	Dr DeepuSurendran	9995452827
Nat	ional Health Mission		
33	State Mission Director	Dr.Rathan Kelkar I A S	9483899911
34	State Programme Manager & Appellate Authority (RTI), NHM	Dr. V.R. Raju	9400355719
35	Director Finance	Smt. M Geethamony Amma	9072681600
36	State HR & Administration Manager	Sri. Suresh K	9946292222
37	Chief Engineer	Smt. Anila C J	7592002255

38	Senior Administrative Assistant/Public Information Officer	Smt. Vinodini N	9495637547	
39	Internal Audit Officer	Sri. M. Ajithkumar	8921424362	
40	State Nodal Officer NCD	Dr. Bipin K Gopal	9946105969	
41	State Nodal Officer {Adoloscent Health}	Dr. Amar Fettle	9946123995	
42	State Quality Assurance Officer	Dr.Amjith E Kutty	7593864205	
43	State Nodal Officer (Training)	Dr.Divya.V.S	9446588176	
44	State Nodal Officer (Child Health)	Dr.Sreehari M	9539191910	
45	State Urban Health Manager	Dr.Athira Krishnan	9946100511	
46	State Data Officer	Sri. Preeth V S	9447859326	
47	Head (Social Development)	Dr.Mathews M Numpeli	9946777951	
48	State Epidemiologist	Dr Aarathee	9947801678	
KM	SCL			
49	MD KMSCL	Mr Ajaya Kumar IAS	9447389890	
50	GM KMSCL	Dr Dileep Kumar S R	9496550269	
Sta	State Health Agency			

51	Executive Director	Dr.Rathan Kelkar IAS	9483899911
52	Joint Director (Finance)	Smt. M Geethamony Amma	9072681600
53	Joint Director (Operations)	Dr.E.Bijoy	974455010
54	Manager (Grievance Redressal and M&E)	Shri.Anikrishna	9037268683
55	Manager (Hospital Network & Quality Assurance)	Dr.Vimal	996121044
DM	O Health Thiruvananthapur	ram	
56	District Medical Officer	Dr P PPreetha	9946105472
57	District Program Manager	Dr Arun	9946105471
58	Additional DMO/ DSO	Dr Jose D'Cruz	9447010933
59	Additional DMO	Dr Neena Rani	9446121586
60	Deputy DMO	Dr Sukesh Raj	7907876684
61	RCH Officer	Dr DivyaSadasivan	7356446014
62	District T B Officer	Dr Dev Kiran	8547597455
63	Asst Nodal Officer Aardram	Dr Ajeesh	9048466891

Institutional officers - Thiruvananthapuram					
Name of the Institution	Phone Number	NAME	Desigation	Mobilie No	

GH Thiruvananthapura m	0471- 2307874	Dr.Padmalatha	Superintend ent	944775385 1
GH Neyyattinkara	0471- 2221935	Dr.S. Valsala	Superintend ent	902030557 0
DMH Peroorkada	0471- 2432071	Dr.Bindhu.B.K (Supt)	Superintend ent	940008206 0
DH Nedumangad	0472- 2802262	Dr.Silpa Babu Thomas	Superintend ent	828109432 9
THQH Chirayinkeezhu	0470- 2646565	Dr.Shabnam	Superintend ent	944630928 2
THQH Parassala	0471- 2202266	Dr.Unnikrishnan	Superintend ent	944710193 7
THQH Malayinkeezhu	0471- 2282490	Dr.Gayathri.L.K	Superintend ent	907411520 9
TH Fort	0471- 2471766	Dr Stanley S	Superintend ent	904894815 0
TH Varkala	0470- 2602549	Dr.Biju	Superintend ent	854796176 5
TH Nemom	0471- 2390276	Dr Prem Kumar	Superintend ent	944721160 5
TH Attingal	0470- 2622447	Dr.JustinJose.S.J	Superintend ent	944646636 8
TH Vithura	0472- 2856252	Dr. Sasi.M.D	Superintend ent	944705288 6
CHC Iranimuttom	0471- 2455620	Dr.Jalajakumari	Medical Officer	949624919 1
CHC Palode	0472- 2840561	Dr.Sreejith	Medical Officer(I/C)	854772349 6

CHC Kallara SCP	0472- 2860857	Dr.PadmaKesari	Medical Officer	944645629 6
RHTC Vakkom	0470- 2653862	Dr. Siju	Medical Officer	949529717 0
CHC Poovar	0471- 2210017	Dr.Jawahar.I.S	Medical Officer	996149277 0
CHC Manamboor	0470- 2688354	Dr.Anilkumar.P	Medical Officer	944709220 5
CHC Perumkadavila	0471- 2276169	Dr. Sunimol	Medical Officer	989502598 8
CHC Vellanadu	0472- 2882199	Dr . Jayakumar	Medical Officer	701277287 6
CHC Vizhinjam	0471- 2480400	VASHIDA GUNASELVI	Medical Officer	944747073 0
CHC Vellarada	0471- 2242075	Dr.Sunil	Medical Officer	996136726 7
CHC Puthenthopu	0471- 2750023	Dr. Achamma	Medical Officer	984751241 7
CHC Kanyakulangara	0472- 2832209	Dr.PreethaSoman. S	Medical Officer	944738725 0
CHC Pulluvilla	0471- 2260348	Dr Mangala S	Medical Officer	952601251 5
CHC Kesavapuram	0470- 2672157	Dr.Shaji.K.V	Medical Officer	949700999 92
CHC Pallickal	0470- 2681200	Dr.Jayaram	Medical Officer	944716572 8
CHC Vilappil	0471- 2289185	Dr.Elizabath	Medical Officer	944646709 0
CHC Aryanad	0472- 2853833	RADHIKA. C	Medical Officer	944698143 8

CHCAnchuthengu	0470- 2656870	Dr.Shyamjivoise	Medical Officer	963381979 5
CHC Venpakal	0471- 2223594	Dr.Y.A AJITH	Medical Officer	944720803 9
CHC Andoorkonam	0471- 2751397	Dr.Rema.L	Medical Officer	890749910 3
Palace Dispensary, Kowdiar	0471- 2433758	Dr.Sumi	Medical Officer	949653637 4
PHC Karamana	0471- 2344935	REJITHA D.R	Medical Officer	808621846 8
PHC Ulloor	Nil	Dr. Sangeeth Shah S	Medical Officer	949759252 3
PHC Bharathannur	0472- 2868629	Dr.Rajeev	Medical Officer	974574441 8
PHC Kizhuvilam	0470- 2794688	Dr.Deepa	Medical Officer	949596369 9
PHC Perumpazhuthoor	0471- 2222183	<u>Dr.LINI.MS</u>	Medical Officer	944780170 0
PHC Kanjiramkulam	0471- 2263505	Dr Asha Rajan	Medical Officer	884849922 9
PHC Navaikulam	0470- 2694300	Dr.Shaninbava	Medical Officer	944780116 9
PHC Kalliyoor	0471- 2405401	MEDICAL OFFICER	Medical Officer	949696923 9
PHC Vellayani	0471- 2382209	Dr.Ajesh	Medical Officer	944648360 6
PHC Azhoor	0470- 2144366	Dr.PADMAPRASAD	Medical Officer	854718985 9
PHC Parasuvaikkal	0471- 2200071	DR.LIJIMOL B	Medical Officer	953975949 8

PHC Nagaroor	0470- 2678656	DR.NISHA JAYACHANDRAN	Medical Officer	994699880 1
PHC Malayadi	0472- 2891800	Dr. Kannan T	Medical Officer	944724420 8
FHC Poonthura	0471- 2380427	Dr.Beena .S.Thamp i	Medical Officer	994771519 7
FHC Kattakada	0471- 2293828	Dr.Nelson	Medical Officer	944741330 9
FHC Pozhiyoor	0471- 2213345	Dr.Sabu.V,S	Medical Officer	854723336 1
FHC Thiruvallom	0471- 2485788	MINU JACOB	Medical Officer	944625501 1
FHC Kunnathukal	0471- 2250077	Dr.Vijayadas.R	Medical Officer	904810045 6
FHC Tholikkodu	0472- 2878580	Dr. LEKHA THOBIAS	Medical Officer	813988826 5
FHC Edava	0470- 2661040	Dr. Raju G	Medical Officer	892174881 6
FHC Vettur	0470- 2612651	Dr SHAHIM M	Medical Officer	953911945 3
FHC Thonippara	0470- 2667177	Dr.JohnyPererah	Medical Officer	944670187 5
FHC Madavoor	0470- 2681532	Dr.Stency Sebastian	Medical Officer	949674848 0
FHC Pangappara	0471- 2418038	Dr.AjithChakravart hi	Medical Officer	980999891 9
FHC Chettivilakam	0471- 2730404	Dr.John Simon	Medical Officer	994601483 3
FHC Chenkal	0471- 2236622	Dr.Lija	Medical Officer	996136721 8

FHC Kulathoor	0471- 2209551	Dr.SOWMYA	Medical Officer	892116705 3
FHC Karode	0471- 2218561	Dr.Sonykrishna.S.A	Medical Officer	892164100 3
FHC Chembooru	0471- 2257755	DR.MANJUMOHANA DAS	Medical Officer	949768859 0
FHC Kollayil	0471- 2234355	Dr.Anuradha	Medical Officer	989535249 7
FHC Amboori	0471- 2246193	DR.VINCY	Medical Officer	944773282 7
FHC Kallikadu (new)	0471- 2273715	DR. AJOSH THAMBI.T.S.	Medical Officer	940068032 8
FHC Uzhamalakkal	0472- 2899677	Dr.Ramesh Krishnan	Medical Officer	974629133 6
FHC Kuttichal	0472- 2854871	Dr.Joy John	Medical Officer	944714040 5
FHC Kallikadu (old)	0471- 2273739	Dr.SHEEBA S.L	Medical Officer	790764136 1
FHC Mukkola (Vizhinjam New)	0471- 2484603	DR.MALINI.MOHAN	Medical Officer	884887160 5
FHC Veli	0471- 2704618	Dr.BINDHU T	Medical Officer	949571932 1
FHC Mudakkal	0470- 2637475	Dr Saritha S	Medical Officer	989528823 5
FHC Perumathura	0471- 2426533	ARNOLD DEEPAK	Medical Officer	994779229 9
FHC Puthukurichi	0471- 2426562	DR GODFREY LOPEZ.T	Medical Officer	994690651 3
FHC Mangalapuram	0471- 2424100	Dr MINI P MANI	Medical Officer	949582889 7

FHC Peringammala	0472- 2846310	Dr. VIVEK	Medical Officer	949747117 9
FHC Anakudi	0472- 2837790	DR.ANOOP	Medical Officer	828107915 9
FHC Pullampara	0472- 2828047	Dr.NIJU.M.L	Medical Officer	944728277 2
FHC Panavoor	0472- 2865449	Dr.PREETHA S R	Medical Officer	944712755 5
FHC Anad	0472- 2802375	Dr.P.r.Manoj Kumar	Medical Officer	944712858 4
FHC Adayamon	0470- 2649202	DR.SHEEJA .M P	Medical Officer	854749570 6
FHC Karavaram	0470- 2691700	Dr.Fazeela.A	Medical Officer	974725555 6
FHC Pulimath	0472- 2861070	Dr Jayasurya J u	Medical Officer	974577725 4
FHC Cheruniyur	0470- 2612678	Dr Renjini R J	Medical Officer	994635306 7
FHC Vilavoorkkal	0471- 2284080	DR.MALINI	Medical Officer	944724645 7
FHC Maranalloor	0471- 2298524	Dr.Rajesh	Medical Officer	949610249 4
FHC Vembayam	0472- 2834833	Dr.Avis Philip	Medical Officer	828115112 4
FHC Manikal	0472- 2583433	Dr.Heera.T.S	Medical Officer	944697042 1
FHC Ottur	0470- 2612842	DR.SHEEJA.P.K	Medical Officer	944702490 9
FHC Vattiyoorkavu	0471- 2364187	Dr. Nikhil Rajagopal	Medical Officer	828180683 4

FHC Vamanapuram	0472- 2835810	DR.Sajikumar P N	Medical Officer	944725046 9
FHC Kadakampally	0471- 2743392	Dr ANNIE ALOYSIUS	Medical Officer	944616158 7
FHC Paraniyam	0471- 2263786	DR: SUBI. V. P	Medical Officer	949571868 1
FHC Chemmaruthy	0470- 2612862	Dr.Anwar Abbas	Medical Officer	944734045 1
FHC Poozhanad	0471- 2257575	Dr.Vinoj.k.v	Medical Officer	994680300 5
FHC Katakada (New Amachal)	0471- 2293475	Dr.Santhakumar	Medical Officer	944747135 7
FHC Thonnakkal	0471- 2709898	NIMMI K POULOSE	Medical Officer	949747641 7
FHC Aruvikkara	0472- 2886274	Dr.Anju Miriam john	Medical Officer	999528991 0
FHC Karakulam	0472- 2587700	Dr. Jamin.S.M	Medical Officer	949761313 0
FHC Kilimanoor	0470- 2651313	Dr.Sudhir Jacob	Medical Officer	949701583 2
FHC Pallichal	0471- 2400367	Dr DEEPA M S	Medical Officer	812953464 1
FHC Balaramapuram	0471- 2402209	Dr BIJU R.M	Medical Officer	949763886 6
FHC Keezhattingal	0470- 2621131	Dr.Bhagyalekshmi	Medical Officer	949776886 8
FHC Kottukal	0471- 2269070	Dr Chintha Sukumaran	Medical Officer	974667129 7
FHC Jagathy,Tvm	Nil	Dr.Ambili	Medical Officer	999589125 2

FHC Thycaud, TVPM	0471- 2323457	Dr. Dhanya. G Krishnan,	944741051 1
Nedumangadu, Thiruvananthapura m	9746314014 (MO)	Dr.Arun	974631401 4
Rajbhavan dispensary Kowdiar,TVPM	0471- 2728745	Dr.Pearl	944745273 8
MLA hostel Health Clinic, TVPM	0471- 2222251		
Jail Dispensary Kattakada,TVPM	0472- 2850044		
Central Prison,Poojappura,T VPM	0471- 2342139		
Secretariat Health Clinic, TVPM	0471- 2518649	Dr.Athul	994742987 1
Palayam Police Hospital, TVPM	0471- 2320746 MO No.9497454 672	Dr.Maya	949745467 2
Police Hospital,Peroorkada , TVPM	0471- 2433949 MO No.9633999 921		963399992 1
Mental Health Centre, Peroorkada	0471- 2434762	Dr.Anil	944710198 8
CDH Pulayanarkotta	0471- 2442041	Dr.Vanaja	940015283 5

Govt. Ayurvvedic Maternity Hospital, Poojappura, TVPM	0471- 2350938	CHITHRA REVI	854735023 7
Coastal speciality hospital, Valiyathura, TVPM	0471- 2502480	Dr.Sonee Thomas	984619109 5