



**Thanks to all
the people who
clapped for us!**

**It has given us
more impetus to
keep on with the
battle against
COVID-19.**

**Fearlessly
Against
COVID19**



Let's advise
social
distancing
for a
COVIDless
life!

**Fearlessly
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Let's make our clinics
COVID-19 ready!

Wipe surfaces and objects
with disinfectants.

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COVID19**



We understand it's a difficult time, but the country is depending on you.

**Stay calm
& energized**

**Fearlessly
Against
COVID19**





**Let's have
Personal
Protective
Equipment (PPE)**
handy in our clinics to
stop COVID-19 in its
tracks

N95 respirators/masks
Gowns
Goggles
Gloves
Hand Sanitizers/
Soap & water

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**Your passion and dedication
make people look up to you.**

**The country is
counting on you to
fight COVID-19.**

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The Government announces an allocation of Rs 15,000 crores for

Boosting testing facilities

Personal Protective Equipment (PPE)

Isolation beds

Ventilators

Help is at hand – keep up the good work!

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The best thing about a stethoscope
is that you can tune out the noise
and tune in to the truth!

Keep up the good work!

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**IMA encourages
telephonic
consultations
where possible,
especially for
known patients.
Stay safe!**

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When assessing patients
separate patients with symptoms
and signs suggestive of **COVID-19**,
and provide them masks

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IMA urges health care facilities to continue delivering essential services

Provide emergency care

Provide telephonic and online consultations where possible



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Protecting yourselves and your staff

Use Personal Protective Equipment (PPE)

Clean often-touched surfaces

Sterilise all equipment

**Wash hands and disinfect stethoscopes
between consultations**

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**IMA urges you to stay
composed, confident,
informed and
diligent while
carrying out
your duties.**

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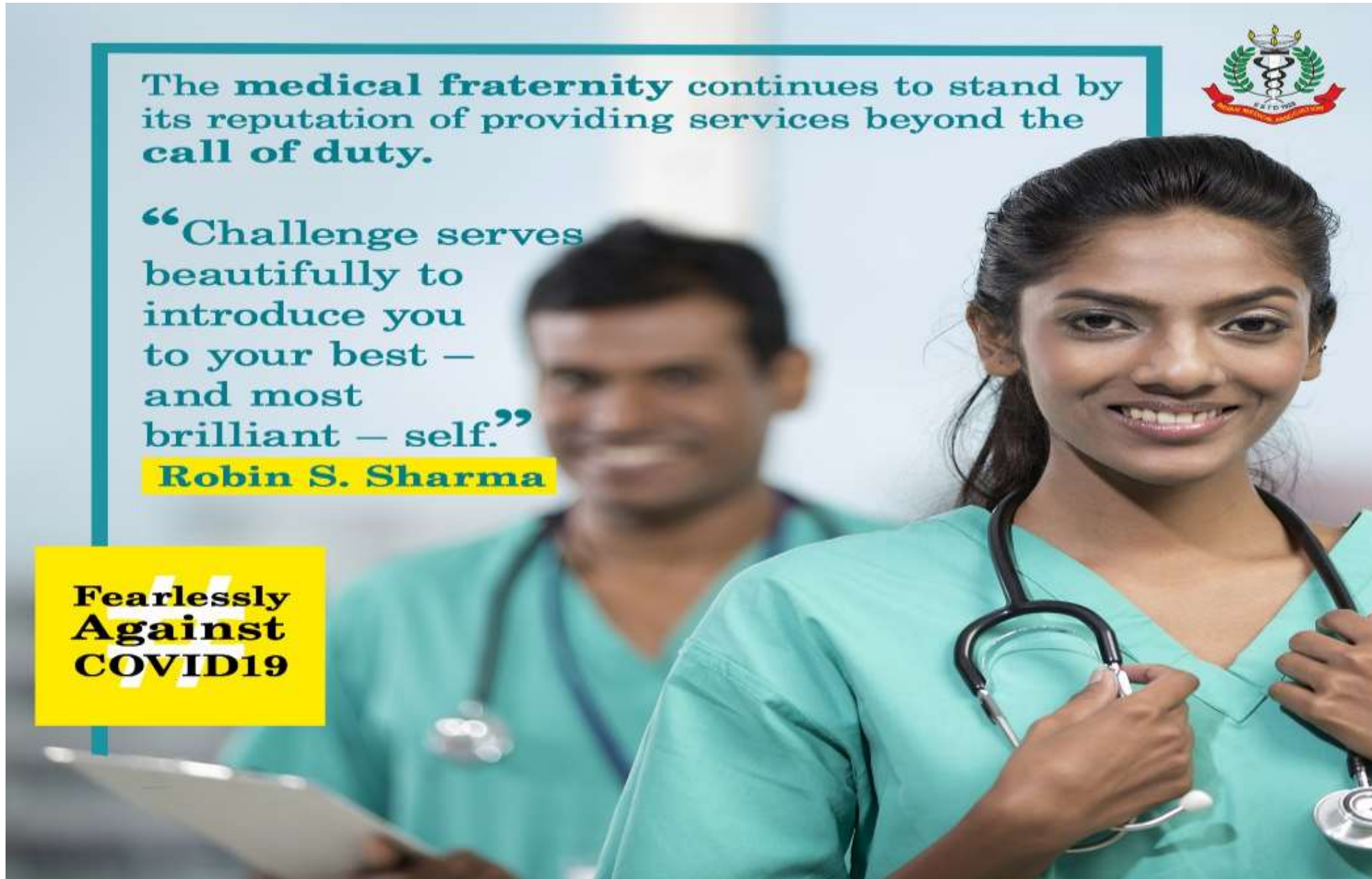


The **medical fraternity** continues to stand by its reputation of providing services beyond the **call of duty**.

“Challenge serves beautifully to introduce you to your best – and most brilliant – self.”

Robin S. Sharma

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Keep yourself and your staff protected at the frontlines of the COVID-19 battle.

- **Use personal protective equipment (PPE) for yourself and all your staff.**
- **Train staff on the correct way to wash hands.**
- **Train staff on the proper ways to put on and take off PPE.**
- **Train staff on adhering to infection prevention practices.**
- **In isolation wards, damp dust and mop floors with disinfectants.**
- **Clean surfaces with sodium hypochlorite solution.**

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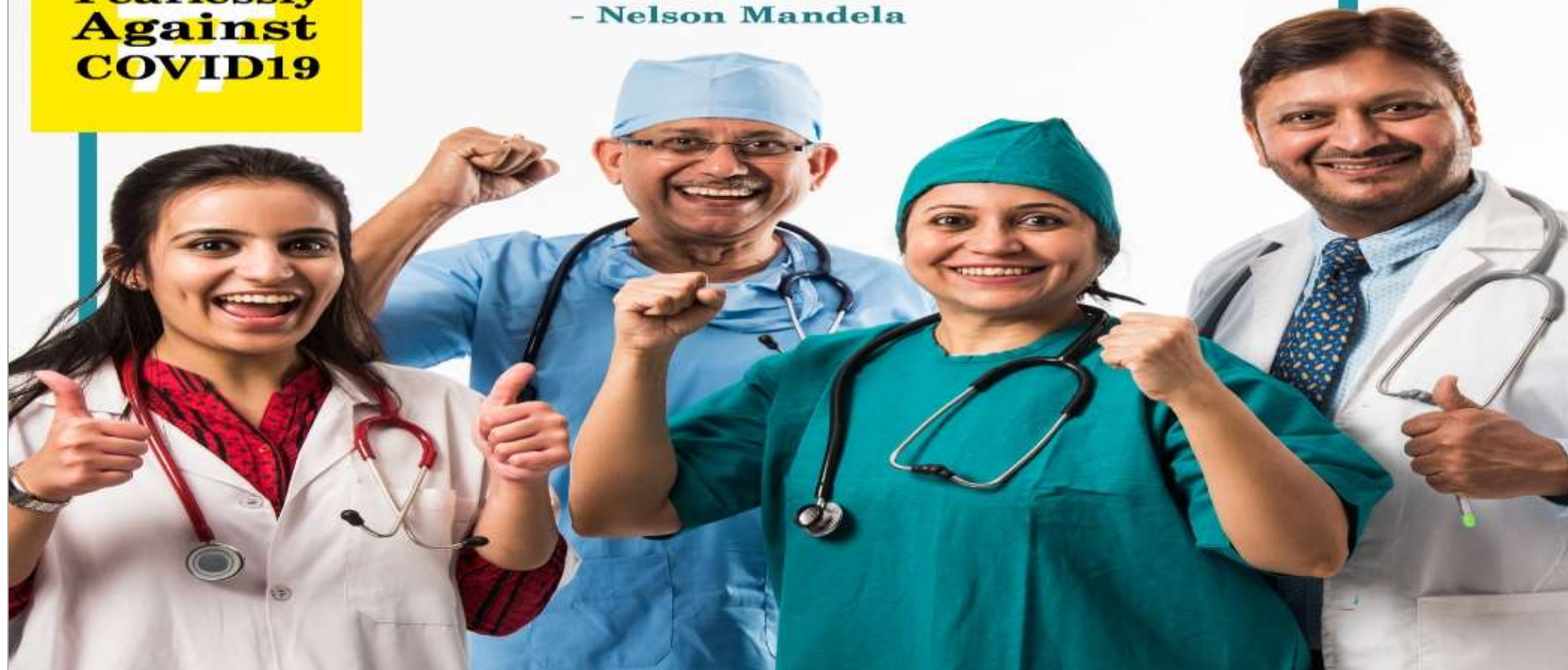


The Indian medical community continues its valiant,
heroic and selfless fight.

**“ I learned that courage was not the absence of fear,
but the triumph over it. The brave man is not
he who does not feel afraid, but
he who conquers that fear. ”**

- Nelson Mandela

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Medical personnel around the world have been tireless in their efforts to combat the pandemic.

“ Courage isn't having the strength to go on - it is going on when you don't have strength. ”

- Napoleon

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**Nurses are on the frontline
of the fight against COVID-19.**

**Their sacrifices, diligence, and
cheerfulness are an inspiration to all.**

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The Indian medical community is courageous and heroic in its preparation and fight against COVID-19.

“My strength lies solely in my tenacity.”

— Louis Pasteur

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Reusing N95 masks:

- The N95 mask can be reused.
- Give 3 masks to each person; use in rotation.
- Air dry masks after use, preferably in the sun.
- Train staff on the correct ways to don and doff masks.
- Do not touch the inside of the mask.
- Dispose the mask as per protocol.
- Discourage frequent touching of the face or mask.
- Check the integrity of masks before use.

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20-04-19-CVV01- Guide for Pvt Clinics

Post copy:

IMA has issued guidelines for medical practitioners with private practices to prepare for the post-lockdown period, and for handling potential COVID-19 cases.

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**Essential
post-lockdown
preparations**
for private health facilities

Advise caregivers of elderly patients to stay cautious, but connected:

- Ensure hand and cough hygiene when interacting with senior citizens.
- Disinfect frequently touched objects like door handles, spectacles & phones.
- Sanitize canes, walkers, wheelchairs and other equipment.
- Take care of their physical, mental and emotional well-being.
- Do not keep them bed-bound or in isolation.

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20-04-20-CVV02- Advisory for online and telephonic consultations

Post copy:

In-person consultations have the advantage of having eye contact, being able to make minor observations, assessing body language, and benefiting from physical examination of the patient. Technology cannot replace clinical medicine and must be used with caution. It should be used only to identify the need of hospitalisation, and conduction of routine consults when a doctor is familiar with the patient's medical history.

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**Advisory for online and
telephonic consultations**

20-04-21-CVV03- Advisory for routine immunisation

Post copy:

IMA advises that routine immunisations should continue with abundant caution during the COVID-19 pandemic.

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**Advisory for
routine immunisation**
during COVID-19 pandemic

20-04-22-CVV04- Advice for elderly patients

Post copy:

The elderly are especially susceptible to COVID-19 &, if infected, may have worse outcomes. Advise your elderly patients to stay home, stay safe & stay healthy.

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Advice for elderly patients

WHO's My 5 Moments for Hand Hygiene:

- Before touching a patient.
- Before clean or aseptic procedures.
- After body fluid exposure or risk.
- After touching a patient.
- After touching a patient's surroundings.

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Guidelines for taking oropharyngeal or nasopharyngeal swabs of suspected COVID-19 patients:

- Swabs can be taken in a regular examination room.
- A negative-pressure room is not required.
- The health care worker must use full PPE.
- The room can be reused after a few minutes.



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COVID-19 patient placement:

- Place confirmed patients in well-ventilated single rooms.
- Observe contact and droplet precautions.
- If short of rooms, cohort only confirmed patients together.
- Beds must be set at least 1 metre apart.

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Transmissibility of coronavirus:

- Transmits easily and efficiently.
- Reproduction number (R_0) is estimated at 5.7.
- Contagiousness is highest in the first 3 days of symptoms.
- Transmission is low, but possible, from asymptomatic patients.



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20-04-25-CVV05-The virology

Post copy:

The 'Novel Coronavirus', which causes COVID-19 (coronavirus disease 2019), has been thus named as it has not been previously identified. It is not the same as the coronaviruses that commonly circulate among humans and cause mild illness, like the common cold. The International Committee on Taxonomy of Viruses announced "severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)" as the name of the new virus on 11 February 2020.

Source: [https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/naming-the-coronavirus-disease-\(covid-2019\)-and-the-virus-that-causes-it](https://www.who.int/emergencies/diseases/novel-coronavirus-2019/technical-guidance/naming-the-coronavirus-disease-(covid-2019)-and-the-virus-that-causes-it)

<https://www.cdc.gov/coronavirus/2019-ncov/faq.html>

Source: <https://www.cdc.gov/coronavirus/2019-ncov/faq.html#Coronavirus-Disease-2019-Basics>

Source: <https://www.cdc.gov/coronavirus/2019-ncov/prevent-getting-sick/how-covid-spreads.html>

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Coronavirus

The virology

20-04-26-CVV06-Aerosol Generating Procedures

Post copy:

The Clinical Infectious Diseases Society (CIDS) advises that the following procedures should be considered to be aerosol generating procedures (AGP):

- Open suctioning of airways.
- Sputum induction.
- Cardio-pulmonary resuscitation.
- Endotracheal intubation & extubation.
- Non-invasive ventilation (BiPAP, CPAP).
- Bronchoscopy.
- Manual ventilation.
- Nebulisation & high-flow oxygen delivery.

CIDS suggests that minimal aerosolization occurs during nebulisation & high-flow oxygen delivery but includes them in the list due to the proximity of health care workers (HCW) to the patients. Precautions to be taken if a COVID-19 patient is subject to AGP:

- Perform AGPs in well-ventilated rooms with airflow of 160 litres per second per patient or in negative-pressure rooms.
- 12 air changes per hour are recommended, with controlled direction of air flow when using mechanical ventilation.
- All HCWs should use appropriate PPE:
 - N95 masks are recommended, with a seal check performed before entering the room.
 - Eye protection (goggles or face shield).
 - Non-sterile long-sleeved gown.
 - Gloves.
 - Shoe covers & triple gloving are not recommended.

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**Aerosol
generating
procedures &
necessary
precautions**

COVID-19

Spectrum of illness

- 81% - Mild (no or mild pneumonia)
- 14% - Severe (RR \geq 30, SpO₂ \leq 93%, PaO₂/FiO₂ \leq 300 mm Hg, or 50% lung involvement in 24-48 hours)
- 5% - Critical (respiratory failure, shock or MOSF)

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Coronavirus FAQ

Q: Is the coronavirus excreted in human faeces?

A: Yes.

Q: Is faeco-oral transmission of coronavirus a risk?

A: Not a serious risk.

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Coronavirus: Incubation period

- 2 days to 2 weeks following exposure.
- Average between 5 & 6 days.
- 97.5% people develop symptoms within 11.5 days of infection

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