

GOVERNMENT OF MEGHALAYA
HEALTH & FAMILY WELFARE DEPARTMENT

Orders by the Governor

NOTIFICATION

Dated Shillong, the 30th July, 2020.

No.Health.141/2020/88:-The Protocol for Rapid Antigen Testing for COVID-19 in Meghalaya is issued for information and compliance of all concerned.

Protocol for Rapid Antigen Testing for COVID-19 in Meghalaya

Detailed instruction

- ❖ Each district to set up adequate number of Antigen Testing Centers (ATC), preferably near containment zones.
- ❖ Temporary arrangement can be made with following condition.
 - ✓ The ATC room should be air-conditioned to ensure that the preferred temperature of the kits is maintained between 2° to 30° C.
 - ✓ ATC should have water for hand washing, electricity & internet.
 - ✓ ATC should have 2-4 rooms or dedicated space divided by partition for arranging sample collection, testing & data entry.
 - ✓ Each room should preferably have one counter and a maximum of 2 counters for the same.
 - ✓ Each ATC should have one qualified Medical doctor for supervision.
 - ✓ Each counter should have Lab Technicians /Rashtriya Bal Swasthya Karyakram (RBSK) Medical Officers ,one Data entry operator (DEO) / staff nurse (SN) for entry, dedicated staff to avoid over crowding.

Essentials required for Rapid antigen test:-

- ❖ PPE is mandatory for all personnel involved in Sample testing
- ❖ Disinfectants/ Hand sanitizer
- ❖ Soap and water (for hand washing)
- ❖ Refrigerator/Vaccine carrier box for storing antigen kits
- ❖ 1% sodium hypochlorite for cleaning work surfaces
- ❖ Appropriate biomedical waste management bags for disposal of infectious wastes
- ❖ VTM and swabs (for collection of samples for RT-PCR for symptomatic negative suspected case

Other instructions

- ❖ The rapid antigen test should be performed as per the manufacturer's instructions. The video link can be accessed at
 - <https://www.youtube.com/watch?v=syXd7kgLSN8>
 - <https://www.youtube.com/watch?v=mBdaOHJWxl4&feature=youtu.be>

- ❖ Sample collection should be done by trained personnel wearing proper PPE.
- ❖ **Only nasopharyngeal swab should be collected from each person. No other sample should be collected.**
- ❖ For discarding of the kits and PPE, proper biomedical waste management bags should be available at the ATC.

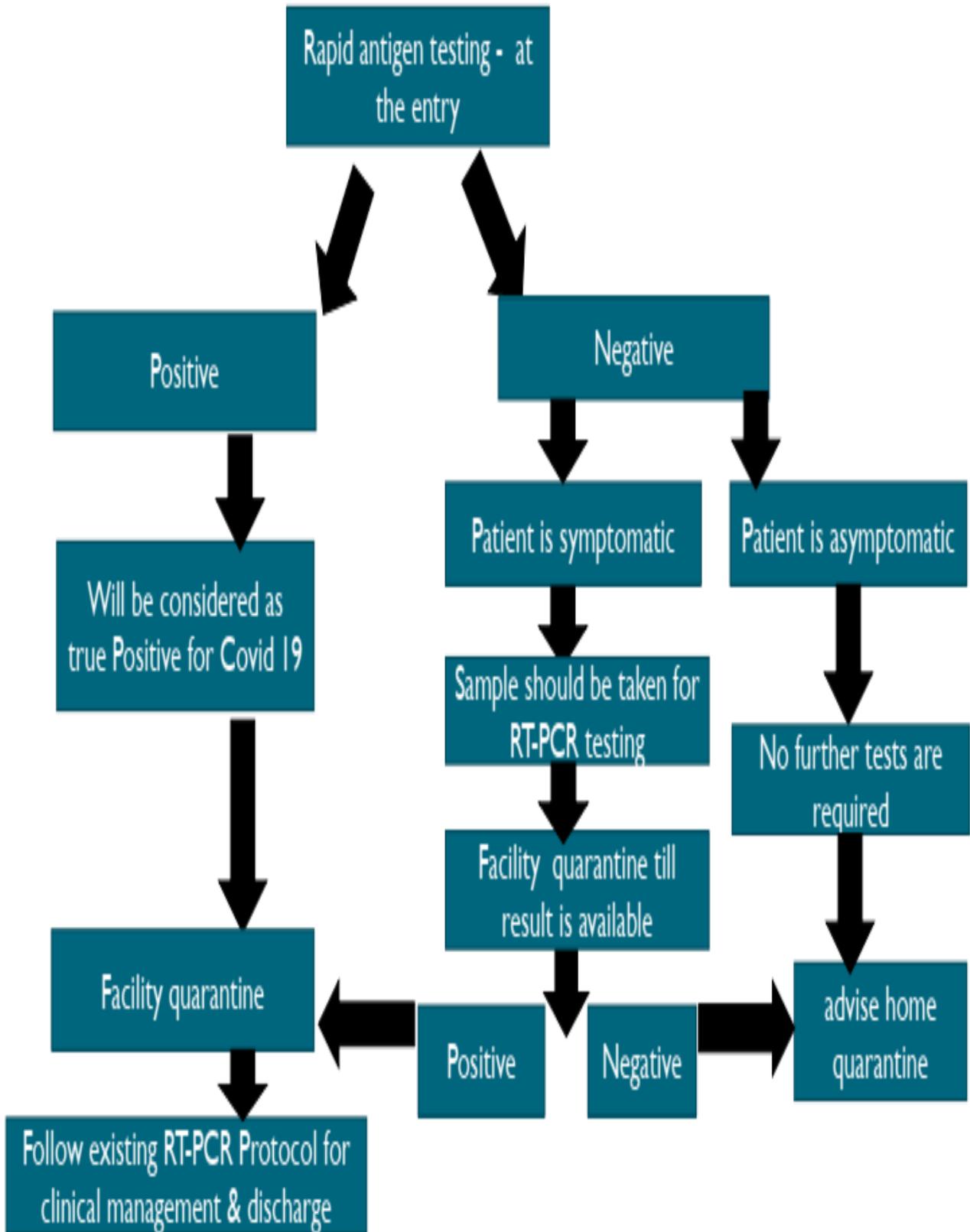
Recording & reporting in ICMR portal

- Details of the patient tested must be filled up in the Specimen referral form (SRF).
- Current version of the SRF available at icmr.gov.in must be used.
- Each district will be given five login credentials to enter the antigen test details.
- All the results should be uploaded on the ICMR portal: "<https://cvstatus.icmr.gov.in/login.php>" on a real time basis.
- Results should be certified by MO
- No results should go unrecorded
- In antigen testing, once MO confirms the result, the test shall not be repeated under any circumstances unless advised by MO.
- SRF for RT-PCR should be duly signed by MO

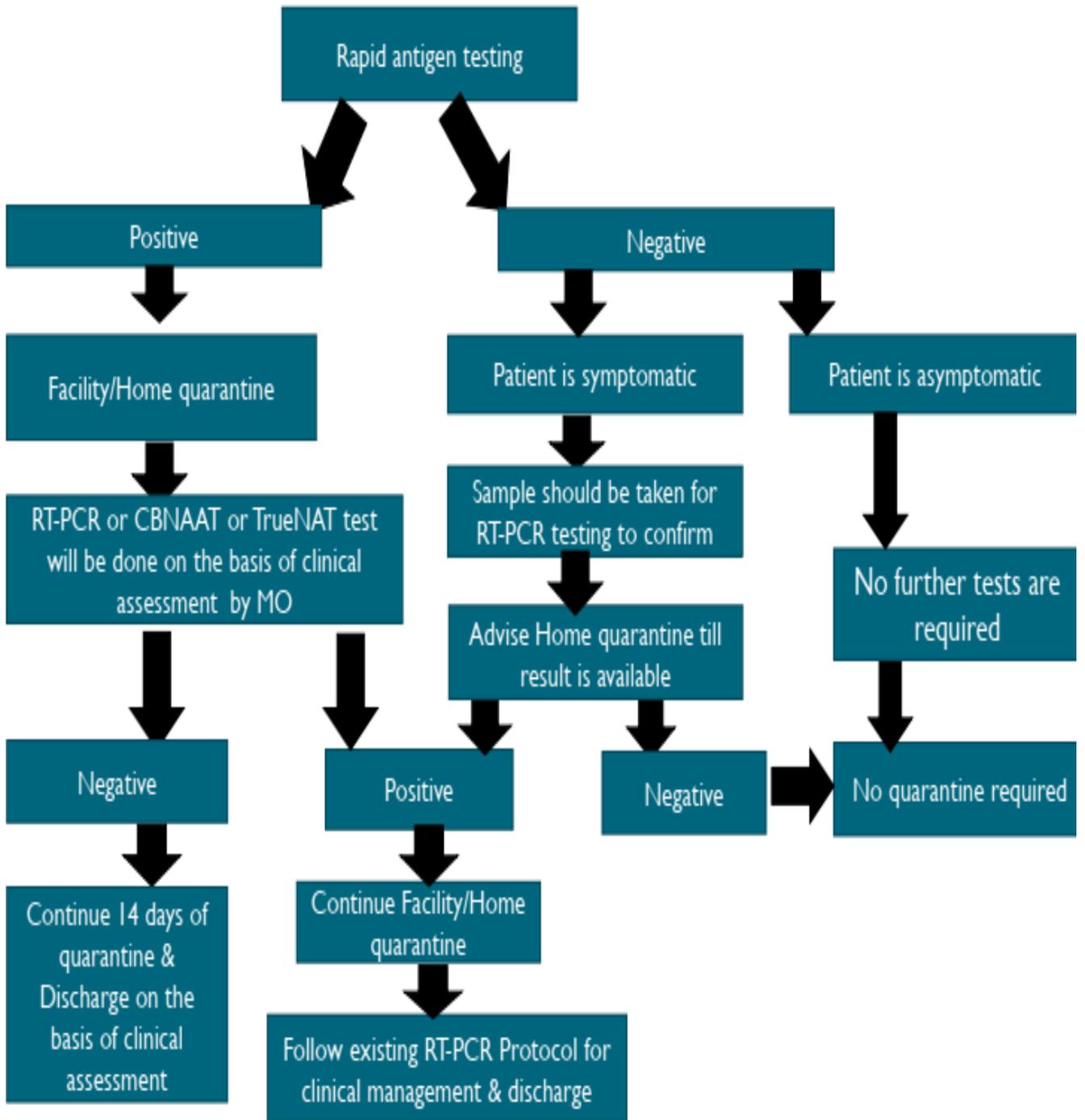
Interpretation of results, and further action

- ❖ The first reading should be taken at 15 minutes after inoculation of the sample in the cassette.
- ❖ For all the samples, the control line should be visible after 15 minutes. If the control line is not visible, then the test should be considered as invalid.
- ❖ For positive samples (**Red/Pink line-faint**), the test line should be visible along with the control line.
- ❖ In case of negative results at 15 minutes, keep the cassette till 30 minutes for final reading.
- ❖ For symptomatic people who are negative by rapid antigen testing, nasal swab/throat swab should be collected in VTM for real-time PCR testing at the nearby lab. The VTM should be sent under cold conditions to an ICMR approved testing laboratory.

For Returnees



For Containment Zones/ Random Samples Done at Markets, etc.



Sd/-
(Sampath Kumar, IAS)
Commissioner & Secretary to the Government of Meghalaya
Health & Family Welfare Department.

Copy to:

1. The Secretary to the Governor of Meghalaya for kind information of Governor.
2. PS to the Chief Minister, Meghalaya for kind information of Chief Minister.
3. PS to the Deputy Chief Minister, Meghalaya for kind information of Deputy Chief Minister.
4. PS to the Minister, Health & Family Welfare Department, Meghalaya for kind information of Minister.
5. PS to all Ministers, for kind information of Hon'ble Ministers.
6. PS to Chief Secretary to the Government of Meghalaya for kind information of Chief Secretary.
7. The Additional Chief Secretary/Principal Secretaries/Commissioner & Secretaries/Secretaries of all Departments, Government of Meghalaya.
8. Mission Director, National Health Mission, Meghalaya, Shillong.
9. Director of Health Services (MI)/(MCH&FW)/(Research), Meghalaya, Shillong.
10. The Director of Information & Public Relations, Meghalaya, Shillong for wide circulation in the print and electronic media of the State.
11. The Director General of Police, Meghalaya.
12. The Deputy Commissioner,
East Khasi Hills, **Shillong** /West Khasi Hills, **Nongstoin**/ South-West Khasi Hills, **Mawkyrwat**/ East Jaintia Hills, **Khliehriat**/ West Jaintia Hills, **Jowai**/ Ri-Bhoi District, **Nongpoh**/ West Garo Hills, **Tura**/ South-West Garo Hills, **Ampati**/ East Garo Hills, **Williamnagar**/ South Garo Hills, **Baghmara** /North Garo Hills, **Resubelpara**.
13. Joint Director of Health Services (MCH&FW) I/c IDSP, Meghalaya, Shillong.
14. District Medical & Health Officer
East Khasi Hills, **Shillong** /West Khasi Hills, **Nongstoin**/ South-West Khasi Hills, **Mawkyrwat**/ East Jaintia Hills, **Khliehriat**/ West Jaintia Hills, **Jowai**/ Ri-Bhoi District, **Nongpoh**/ West Garo Hills, **Tura**/ South-West Garo Hills, **Ampati**/ East Garo Hills, **Williamnagar**/ South Garo Hills, **Baghmara** /North Garo Hills, **Resubelpara**
15. All Administrative Departments/Heads of Departments

By Orders, etc.,



Joint Secretary to the Government of Meghalaya,
Health & Family Welfare Department.
