



Epidemiology Unit

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Guideline for the Home quarantine / Quarantine in non-health care settings

“Home quarantining” refers to keeping visibly healthy, possible high-risk contacts separately at non-health care settings. High risk contacts include individuals returning to Sri Lanka from countries where local transmission has been established for coronavirus infection, and those who had maintained close contact with a suspected or diagnosed case of COVID- 19. Such high risk contacts must be home quarantined for 14 days to prevent community transmission.

Following measures are expected to be followed under this concept:

1. Consider to allocate a separate room with adequate ventilation at home if possible and household members should stay in another room or to be separated from the returnee.
2. Maintain at least one meter distance from family members.
3. Preferably, household members should use a separate bathroom. But, if sharing the same bathroom, cleaning of taps, doorknobs and utensils with soap and water are a requirement.
4. Need to minimize visitors to home and returnee should not face any visitors.
5. Frequent hand washing with soap and water for at least 20 seconds at a time and maintain alcohol based hand hygiene in instances where hand washing facilities are inadequate
6. Avoid touching eyes, nose and mouth with unwashed hands.
7. Home quarantined person is expected to monitor body temperature using a thermometer twice a day. If gets fever , cough, difficulty in breathing, sore throat, body aches and pain, including flue like symptoms, immediately inform MOH / PHI of the area immediately.

8. The disposable facemasks and gloves after use should be properly discarded without reuse, preferably in a closed container
9. Assign separate dishes, drinking glasses, cups, eating utensils, towels, bedding, and other items for the quarantined person.
10. Used utensils, bed linen and clothes should wash with soap and water

Self-monitoring with active public health supervision

1. MOH is the responsible officer for field supervision and follow up of home quarantined persons.
2. MOH assigns Public Health Inspector (PHI) for monitoring of quarantined persons.
3. PHI also will check their health status daily by visiting, by a telephone inquiry, SMS throughout the quarantine 14 days' period.
4. In case of a person with signs and symptoms, PHI should immediately inform the MOH and the Regional Epidemiologist.
5. Transportation of suspected patient is arranged through "1990 on-call ambulance (Suwaseriya) service" to the nearest government hospital or to the designated hospitals
6. Regional Director of Health Services (RDHS) and Provincial Director of Health Services (PDHS) support in administrative activities and Provincial / District Consultant Community Physicians (CCP) and Regional Epidemiologist are providing technical support.