

BRIEF INTRODUCTION FOR CURRENT SITUATION OF COVID-19 VIRUS INFECTION IN THE CHINGELTEI DISTRICT



Scheme of Management COVID-19 Pandemic

Government-State Emergency Commission/ Ministry of Health/ National Center of Communicable Diseases

City Mayor Office-City Emergency Cormission/UB Health Department

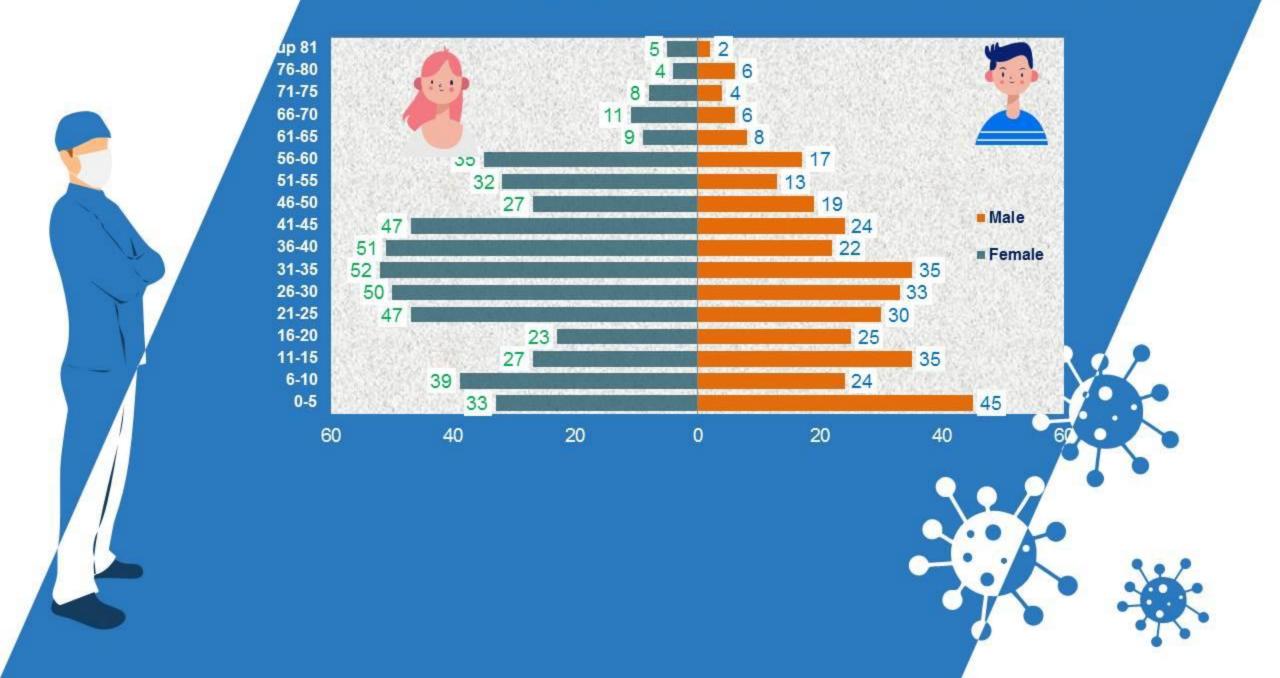
District Governor Office-District Emergency Comission /Medical Center of the Chingeltei District

Medical Center of the Chingeltei District-Medical Emergency Staff

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- Call Center opened since 24 April 2021, Works 9 operators 24 hours by 3 shifts, receiving call for COVID-19 and informing to 3 epid-control and clinical team and 16 Family Clinics
- 3 mobile teams of Epid-control groups works 9 medical workers 8 hours with 3 cars: Collecting nasal specimen from close contact person, checking by COVID919 express test and send to PCR laboratory.
- 5 clinical teams works 15 medical workers 24 hours by 3 shifts, with 5 cars: Evaluating patient with positive Laboratory test and PCR, consulting to patient and dropping to hospitals.
- Screening COVID-19 by laboratory tests:
 PCR in Molecular biology laboratory-more than 107 thousand.
 Covid-19 express test-12 thousand
- Since 22 June 2021 opened 30 beds hospital for COVID-19
 30 beds hospital-23, Isolating observing place-53 (Dormitory), were treated in other hospitals-324, Total treated 402, died-39
- Vaccination 2 Points: (Sport Hall of DED, Sport Complex of the CD The total number of people who need to be vaccinated-151203 (100%) First Dose-101983 (67,4%) Second Dose-82238 (80,6%)

Positive case by age and sex /under control in 16 Family Health Center/



Treating cases at home (The monitoring period has not expired)





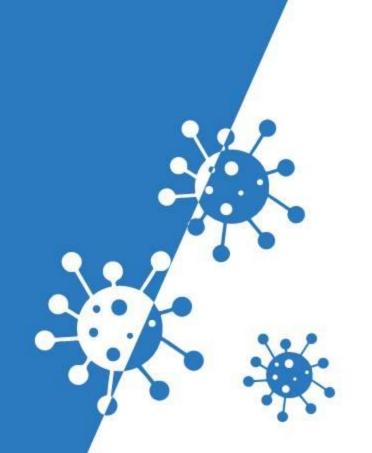


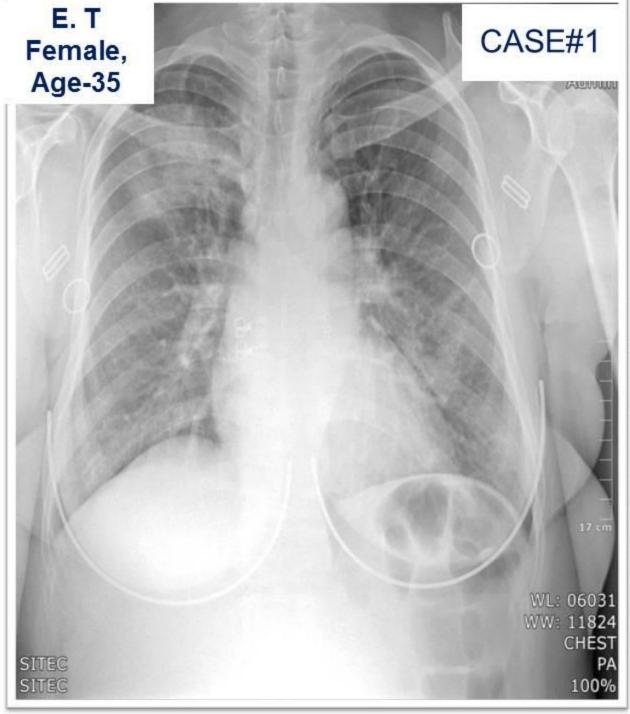
Under Infection control:

- Pregnant, Breastfeeding mother-52
- Age up 55-289
- Age under 0-5 children-69

By Clinical Symptoms:

Severe and very severe-297 Light-90 treating in hospitals.





E. T, age 35, female, Hospitalized on 22 June 2021

Complaints: Cough, White, frothy expectoration, shortness of breath, stab in the chest and in the heart and diarrhea,

History of Disease: Started 18 June, Cough, bloody sputum, fever +38'C, using medicine vitamin C and D, Umifenovirum (Arbidol) and ibuprofen.

Basic diagnosis: Covid-19 virus infectious

Companion Diagnostics: Hepatitis B, C, D and Cirrhosis

Molecular Biology lab: PCR(+)

Exam: Physical condition is lighter and smarter condition.

BP121/78, Heart rate-70 Saturation-98%

Clinical Laboratory:

PLT-138

Total Bilirubin-17,3

AST-109

ALT-156

General urinary analysis:

Density of urine 1030

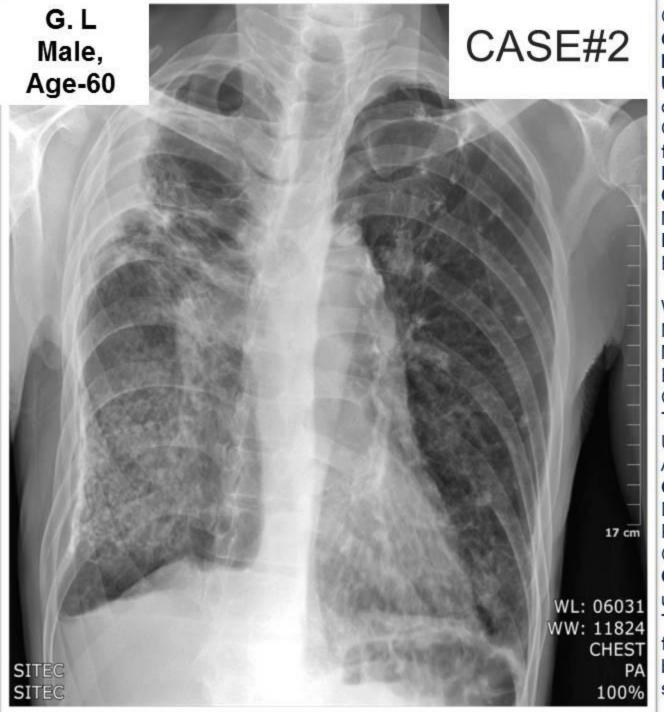
On X-Ray film:

On the general radiography, drawings of the lungs increasing in the inner zone, to apex of the right lung with a slight change in fibrosis,

The lower edge of the right lung probe has an indeterminate margin and a moderately penetrating shadow.

Two roots of the lungs did not expand. The sinuses are free.

The bulge of the diaphragm is bright and uniform, the position is normal. The arches of the heart are not enlarged.



G. Lage-60, male

Complaints: Dyspnea, Fever-37"C, vomiting

History of Disease: 4-5 days ago started Dyspnea and Fever

Using medicine: Euphylline, Dexamethasone, Acetylcysteine, Aspirin,

omeprazole and but the pain did not go away.

Constantly treating by chronic obstructive pulmonary disease and heart failure.

Basic diagnosis: Covid-19 virus infectious

Companion Diagnostics: Scars after tuberculosis

Molecular Biology lab: PCR(+)

Exam: Physical condition is severe and smarter condition.

BP 110/70 HR-115 Saturation-99%

Laboratory: WBC 34.57

NEUT-32.85

MONO-1.00

Biochemical:

CRP-179,5

Total protein-62.4

Urea-9.1

Albumin-32.8

General urinary analysis:

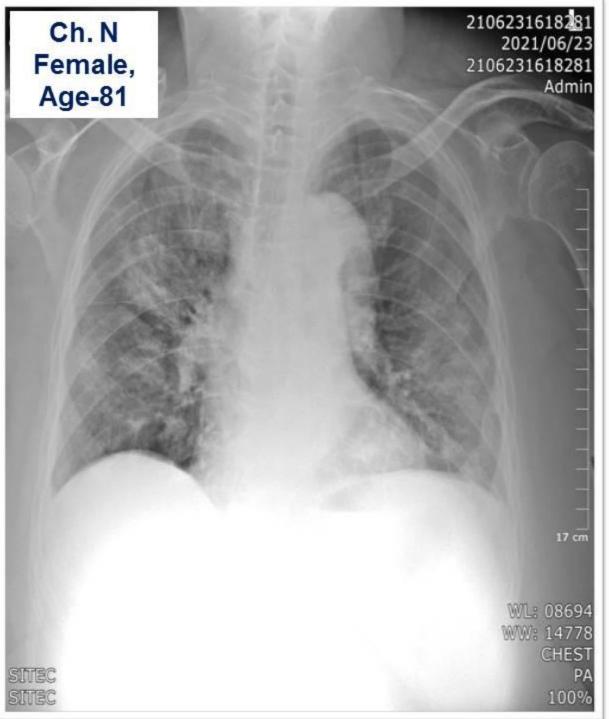
Density of urine-1025

Protein-100

Glucose-100

On X-Ray film: Pulmonary imaging is diffuse, diffuse fibrosis in the upper right lung, with small calcified foci at the apex of the left lung.

Two root structures of the lungs are lost and pulled up, in left sinus is free. The right pleura is slightly sticky, convexity of the diaphragm is bright and uniform, the position is normal. The loosening of the heart is slightly flattened.



Ch. N age-81, female

Complaints: Fever-37"C, Cough, thick sputum.

History of Disease: 3 days ago Fever, increasing BP

Basic diagnosis: Covid-19 virus infectious, very severe form.

Companion Diagnostics: Decompensated diabetes mellitus

Exam: Physical condition is severe and smarter condition.

BP-160/100 HR-92,

Saturation-91%

Laboratory:

Total Bilirubin-24.8

Urea- 11.6

Creatinine-115.3

AST-51.5

Alpha-Amilyze 21

ALT- 50.4

CRP-120,9

General urinary analysis:

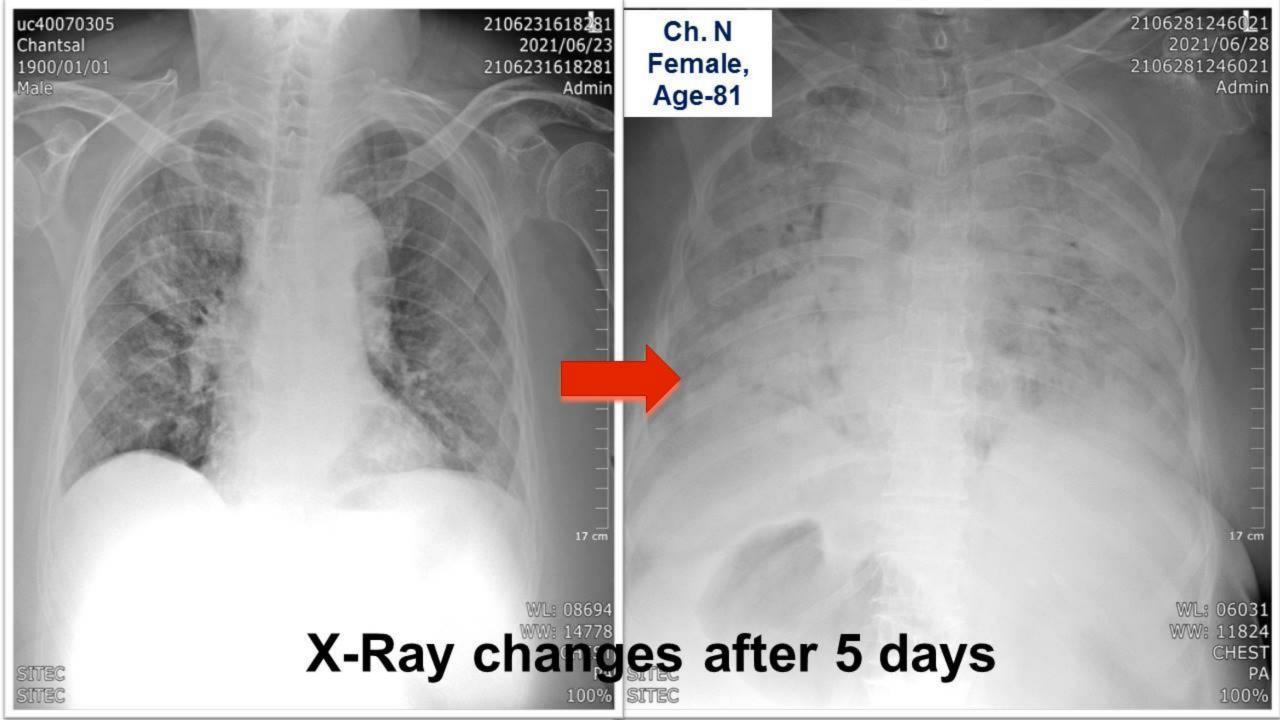
Protein-100

Leukocyte- 25

On X-Ray film:

Pulmonary imaging is diffuse, thickened

Both lower lung and upper right lung probes have indeterminate margins and moderately clear infiltrating shadows. The two lungs are slightly dilated, with a diffuse diffuse infiltrating shadow covering the entire lung. The sinuses are free. The convexity of the diaphragm is bright and uniform, the position is normal. The heart is enlarged to the left. /II st/



QUESTIONS RELATED COVID-19 INFECTIOUS

OB/Gynaecology:

- Can 2 doses of vaccine be given regardless of gestational age?
- What are your thoughts on the slow recovery of sense of smell in people with Covid-19?
- Do you have any reports of Covid-19 infectious disease or vaccine-related fetal malformations?
- Many pregnant women experience a decrease in amniotic fluid. Do you have any information about it and share us
- Many cases are pregnant, breastfeeding mothers after covid-19 have problem heartache and normal by ECG. How to treat them?

Rehabilitation:

- What rehabilitation treatment is given during and after Covid-19 in Taiwan?
- How to quickly restore the lungs to normal and how to support the muscles involved in the child's breathing?
- What traditional treatments are used after Covid-19?

Pediatrics:

- Kawasaki-like syndrome after Covid, treatment, diagnosis, prognosis, probability of occurrence
- Specific treatment of post-Covid Pneumonia?
- Common complications of post-Covid to Children?

Hospital:

What is the shift schedule for health workers in the COVID-19 red zone? (In our case 1 days working in hospital and 7 days at home)

Public health and Primary Health Care:

- How to monitored after hospital treatment of covid-19 at the primary health care level?
- A support and compensation system for evaluating healthcare professionals working with covid-19 in Taiwan.

