

Discussion on Medical Treatment in The Sealing Area of New Coronavirus Pneumonia**Ruijie Luo***

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1. Abstract

In order to effectively build a solid defense line for the prevention and control of the new crown epidemic, scientifically accurately, high-quality and efficiently did a good job in the prevention and control of the epidemic in the sealing and area, implement the management measures of the circle layer of the epidemic risk area, better did a good job in the prevention and control of diseases and medical services in the circle of the epidemic risk area, and combine the actual situation to discuss the medical treatment of the prevention and control of the new coronavirus pneumonia in the sealing area. As of November 1, 2020, the district had a zero permanent resident population of 967868 people, and in the case of the local epidemic situation on February 20, 2022, there was 1 sealing area, 389 medical visits were required in the sealing and control area, 76 people were treated in designated hospitals, and 123 people were sent to the door.

2. Introduction

In extreme cases such as regional closures and even lockdowns, did a good job in providing health management services for people at different epidemic risk areas, meet the basic medical needs urgently needed by the masses during the epidemic prevention and control period through scientific prevention and control and precise policies, effectively curb the spread and spread of the epidemic, coordinate epidemic prevention and control and normal production and living order, and do our best to protect the health rights and interests of the people. Adhere to the principle of people first, life first, in accordance with the principle of "zoning and grading, priority of treatment, strengthen infection control, efficient standardization, and accurate service", coordinate the normal medi-

cal service guarantee work of patients in the sealing and control area, standardize the treatment process, strengthen collaboration, strengthen infection prevention and control, comprehensively improve the ability to guarantee medical services, establish a comprehensive coordination and rescue mechanism of comprehensive and specialty, inter-hospital cooperation +multidisciplinary cooperation in the jurisdiction, and implement the comprehensive coordination and rescue mechanism of chronic disease patients, critically ill patients, dialysis patients, tumor radiotherapy and chemotherapy patients, pregnant women, Medical service guarantee efforts for special key groups such as newborns, mentally ill people, persons with disabilities, and the elderly with limited mobility were strictly prohibited from prevaricating, refusing, or delaying reasonable medical treatment for patients on the grounds of epidemic prevention and control.

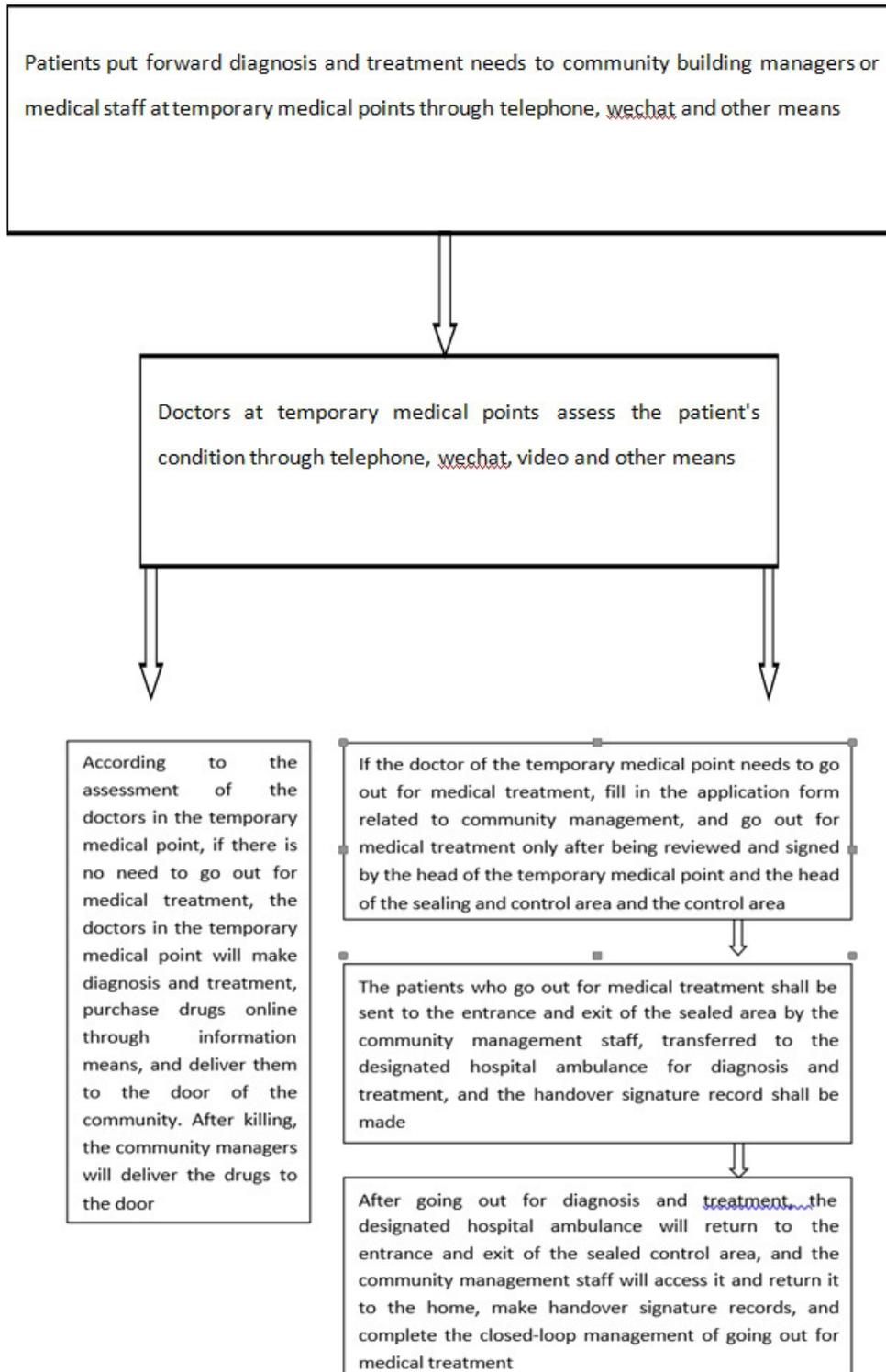
3. Materials and Methods**3.1. Temporary Medical Points are Set up in the Sealing and Control Area**

The medical institutions in the town street under the sealing and control area shall send medical personnel to set up temporary medical points in the sealing and control areas, establish a medical point director and a special person responsible, and arrange at least 1 emergency department doctor, 1 general practitioner and 1 nurse to carry out 24-hour stationary support. For every 5,000 people who serve more than 10,000 people in the sealing area, an additional doctor and 1 nurse are dispatched to provide medical services for ordinary patients in need of treatment in the sealing area. Resident medical staff use online means such as telephone, WeChat, and video to carry out symptomatic guidance for home

treatment behaviors such as medication, conditioning, and rehabilitation. Provide convenience or door-to-door service and drug delivery services for the elderly living alone, pregnant women,

the disabled, people with reduced mobility, hemodialysis patients, mental patients, chronic disease patients, resident medical staff.

Table 1: Flow chart of medical treatment for patients in sealed area.



3.2. Determine The Classification and Management of Designated Hospitals for The Treatment of Personnel in The Sealing and Control Area

It was determined that the general hospital under the jurisdiction was the designated treatment hospital for patients with acute and critical illness, dialysis, tumor radiotherapy and chemotherapy, and chronic diseases in the sealing and control area. Set up isolation and treatment wards, independent surgical sites, and independent hemodialysis sites, improve facilities and equipment, and complete medical personnel to provide medical and health services for the population in the sealing and control area. It was determined that the maternal and child health care institutions in the jurisdiction are designated hospitals for the treatment of pregnant women, newborns and children in the sealed areas. Set up emergency isolation diagnosis and treatment and surgical places for treatment and production in the sealing and control area, improve facilities and equipment, and complete medical personnel to provide medical and health services for the corresponding population. Designate the mental health specialized hospital in the jurisdiction as the designated treatment hospital for patients with mental illness in the sealed control area. Set up isolation wards in sealed areas to provide medical and health services for mentally ill patients.

3.3. Smooth Green Channels for Medical Treatment

The district health department shall organize the units belonging to the temporary medical points, each designated hospital, and the community to appoint special personnel to dock, and establish a "multi-party unimpeded" coordination mechanism to ensure the smooth flow of green channels for medical treatment. The docking of regional health authorities and all medical institutions is smooth, the docking of designated medical institutions and community hospitals and temporary medical points is smooth, and the docking of community hospitals, temporary medical points and community management personnel was unblocked. Establish a ledger of patients with various diseases in the sealing and control area, find out the number of personnel, optimize the medical process, realize the mutual sharing of patient information, smooth the channels for collaboration, and seamlessly connect the disposal. Organize obstetricians and gynecologists to establish a "1 to 1" management mechanism with pregnant women in the sealing and control areas and control areas, and each doctor corresponds to 1 pregnant woman, and provides medical consultation, assessment and other services 24 hours a day through telephone, WeChat, etc., to ensure that each pregnant woman is in place.

4. Results

Implement efficient and safe treatment, the medical personnel in the sealing and control area fully implement closed-loop management, and the treatment process is strictly in accordance with the diagnosis and treatment specifications to ensure the quality and safety of medical treatment. For critically ill patients, regardless of

whether there is a nucleic acid test result, priority is given to the implementation of rescue and corresponding disposal of patients, strengthen personal protection during disposal, and strictly implement the final elimination of personnel and the environment after completion of treatment.

5. Discussion

Strengthen infection prevention and control in hospitals, medical institutions should attach great importance to the prevention and control of hospital infection, and implement the "three specialties" for all kinds of special key groups such as sealing and control areas, isolation areas and centralized isolation points, and delineate special independent areas in the hospital, arrange special personnel, and implement special imaging examination equipment. Strengthen personnel protection and environmental disinfection, implement closed-loop management, organize full-time personnel with hospital sense to conduct occupational exposure research and judgment on medical personnel, cleaning, and security guards involved in the treatment of patients in sealed and controlled areas, and adopt closed-loop management measures for personnel. Immediately after the end of the treatment, a special person is organized to close and disinfect the diagnosis and treatment equipment, environmental object surfaces, indoor air, etc. in accordance with the "Technical Specifications for Disinfection of Medical Institutions", and the medical waste generated is disposed of according to the new crown pneumonia medical waste. Through a variety of initiatives, cross-infection within medical institutions is avoided. Effects of epidemic prevention and control, all medical needed in the containment area are met in a timely manner and are safe and effective. There was no transmission of new coronavirus pneumonia.

6. Conclusion

Medical institutions should formulate emergency plans for medical treatment; implement the construction of isolation wards; establish ledgers and medical service guarantee mechanisms for key groups such as dialysis, maternal, newborn, tumor radiotherapy and chemotherapy, cardiovascular and cerebrovascular diseases, and other critical and serious diseases that require long-term treatment; establish a multidisciplinary joint treatment mechanism, and establish a multidisciplinary treatment expert group for emergency, respiratory, cardiomyopathy, neurology, pediatrics, surgery, obstetrics and other multidisciplinary treatment expert groups to participate in treatment; did a good job in the allocation of medical personnel and vehicle arrangements; and do a good job in the setting and process optimization of emergency first aid, emergency surgery and isolation buffer wards. Smooth green channels, improve the allocation of treatment equipment and drugs; promote internet online medical treatment, appointments for treatment at different times; and implement the extension of the prescription dosage of outpatient chronic disease patients to 12 weeks.

Medical institutions should strengthen the treatment of critically ill patients. For patients with chest pain, labor, stroke, shock, peritonitis, serious trauma to the chest and abdomen, multiple fractures, mental disorders, etc., regardless of whether there was a nucleic acid test result, gave priority to the rescue and corresponding disposal of patients, strengthen personal protection when disposing, and strictly implement the final elimination of personnel and the environment after completion of treatment. Designated medical institutions for maternal and child health care should grasp all pregnant women in their jurisdiction, provide consultation and guidance services according to the needs of pregnancy health care and medical treatment, reasonably adjust the arrangements for obstetric examinations, and scientifically guide medical treatment. It is necessary to optimize the smooth process and ensure the orderly development of obstetric examinations, safe midwifery and disease treatment of women in the sealing and control areas and control areas. For pregnant women over 28 weeks, pregnancy complications, complications and other high-risk pregnant women are closely monitored, in the event of abnormal situations is the initiative to receive medical treatment, to set up a 24-hour consultation telephone, to provide appointments and consulting services for pregnant women. Community medical institutions should make overall arrangements for medical personnel and related materials, fully meet the medical needs of personnel, and safeguard the health of the people. Strengthen overall management, and the district health department shall carry out overall management of medical personnel, beds and vehicles in the jurisdiction according to the development of the epidemic situation.

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