

**GOVERNMENT OF INDIA  
MINISTRY OF RAILWAYS  
(RAILWAY BOARD)**

No. 2005/H-I/7/6

New Delhi, dated 05.01.2005

**The Chief Medical Directors  
All Indian Railways  
CMO/Konkan Railway  
Sr. Proff. RSC/BRC.**

**Sub:- HIV & AIDS- Strategy of Management**

The subject of prevention of HIV infection and other strategies of management of HIV positive persons was discussed in Railway Board on 22.12.04 where the Dy CMD/Nodal Officers of all the 16 zones participated.

After discussion following strategies were worked out which require to be strictly followed and implemented in all the zones.

Targets: four targets were set.

1. To have correct information about number of persons infected by HIV virus.
2. To take all the steps to prevent spread of HIV virus from infected persons to normal persons.
3. To take care of HIV positive persons adequately so that their period of "HIV positive but not yet developed AIDS syndrome" become longer and longer.
4. To treat AIDS cases adequately.

**Target 1:- To have correct information about Number of persons infected by HIV virus.**

Following steps are to be taken:

- 1.1 To ensure that adequate testing facilities for HIV infection is available at various Railway hospitals.
- 1.2 To do more number of screening test for HIV positivity after proper counselling.
- 1.3 Proper uro-genital clinic to be started in various Railway hospitals.
- 1.4 Out put given by VCTC should be properly monitored. Activities done by each of the person of VCTC should be assessed.

1.5 Sentinel survey should be done as below:

- (a) Once a year – 1<sup>st</sup> one in Jan/Feb 2005
- (b) Number of samples for Major Hospitals – 1000 samples  
Medium Hospitals – 500 samples  
Small Hospitals – 200 samples
- (c) May be done for all samples on fixed days/week, which should rotate, or all the days of one week or two weeks.
- (d) Doctors and Paramedical other than Pathology Department should not know about it i.e. which day, which week etc. – when the survey is being conducted.
- (e) All the blood samples are to be taken in plain vial with serial number only identity of persons giving blood should not be available. For convenience of testing 10 samples be added up for testing of HIV.
- (f) Percentage of people positive for HIV to be assessed.

## **Target No.2**

### **To take all the steps to prevent spread of HIV virus from HIV infected person to normal persons.**

Following steps are to be taken

- 2.1 Education/Training:
  - a) To all doctors and paramedical staff. Hundred percent coverage is a **must**.
  - b) Massive health education drives to be given for Railway employees and their family members.
- 2.2 To adopt universal aseptic precaution in Railway Hospitals & Health Units  
Hospital acquired infection control committee to be made operational. Proper system to be introduced in all the Railway Hospitals.
- 2.3 Special precaution to be taken for blood transfusion and blood product transfusion.
- 2.4 Transmission from parents to child: On this front, steps to be taken to prevent parent to child transmission with a target at nearly zero percent.

2.5 Availability of condoms in Railway Hospitals and Health Units:

- (a) Now the condom will be available through District Health Officer of State Govt. where the Railway/Health Unit is physically located.
- (b) Proper annual requirement/demand to be placed before District Health Officer of the State.
- (c) To collect condom as per the demand placed and to arrange distribution through Railway Hospital & Health unit.

2.6 Disposal of Hospital waste:

Following two methods are recommended:

- a) Where centralized collection system has been introduced by local civil authority – there Railway hospitals should join the system.
- b) In other places one room in the corner of the hospital/health unit should be earmarked for sterilizing all the hospital waste by High Pressure Steam Sterilization. After this the sterile waste can be disposed off as domestic waste.

2.7 Post exposure treatment:

For this following steps are to be taken:

- a) To educate all doctors and staff – what to do in the event of needle prick injuries and other injuries that took place in the hospital.
- b) Minimum stock of A.R.T. medicines to be stored in all Hospitals and Health Units.

Every attempt should be taken to replace them by fresh stock long before expiry date but if not possible they are to be sanctioned written off if required.

- c) Some nominated doctor/doctors in each division to be trained in the subject of post exposure treatment for prevention of HIV infection and they should guide local doctors about any such unfortunate incidence if takes place.

### **Target No.3**

**To take care of HIV positive persons adequately so that their period of “HIV positive but not yet developed AIDS syndrome” becomes longer and longer**

For this following steps are to be taken

- 3.1 All HIV positive persons to be given a code No.
  - a) For that Railway code of Zone followed by Division and serial case No. of that division to be used.
  - b) When a HIV Positive person is transferred from one place to another place – New No. to be given in the new zone and against old No. to be mentioned that transferred to new area and new code No.
  - c) Decoding should be possible only at Divisional level.
- 3.2 All HIV positive persons to be allotted to one or another medical officer. The Railway medical officer should behave like parents to these HIV positive persons.
- 3.3 All HIV positive persons are to be regularly followed up both clinically and also by various laboratory tests as recommended and should be given proper medical treatment including ART as per the latest recommendations.

### **Target No.4: To treat all AIDS cases adequately**

All AIDS cases are required to be treated adequately as per latest recommendations.

**All the above directions are required to be implemented properly in all the zones. Quarterly return on HIV/AIDS will be evolved shortly to watch programme implementation.**

**(Dr. D. K. Das)  
Director General/RHS**