



On approval of the Standard for organizing the provision of medical care in case of infectious diseases in the Republic of Kazakhstan

Unofficial translation

Order of the Minister of Healthcare of the Republic of Kazakhstan dated November 20, 2019 No. ҚР ДСМ-144. Registered with the Ministry of Justice of the Republic of Kazakhstan on November 21, 2019 No. 19621

Unofficial translation

In accordance with subclause 6) of clause 1 of article 7 of the Code of the Republic of Kazakhstan dated September 18, 2009 "On Public Health and Healthcare System" **I HEREBY ORDER:**

1. To approve the attached Standard for organizing the provision of medical care in case of infectious diseases in the Republic of Kazakhstan.

2. The Department for Organization of Medical Care of the Ministry of Health of the Republic of Kazakhstan, in accordance with the procedure, established by the legislation of the Republic of Kazakhstan, shall ensure:

1) state registration of this order with the Ministry of Justice of the Republic of Kazakhstan;

2) placement of this order on the Internet resource of the Ministry of Healthcare of the Republic of Kazakhstan after its official publication;

3) within ten working days after the state registration of this order with the Ministry of Justice of the Republic of Kazakhstan submission to the Legal Department of the Ministry of Healthcare of the Republic of Kazakhstan of information about implementation of measures stipulated by subclauses 1) and 2) of this clause.

3. Control over execution of this order shall be entrusted to the supervising Vice-Minister of Healthcare of the Republic of Kazakhstan Aktayeva L.M.

4. This order shall come into force upon expiry of ten calendar days after the date of its first official publication.

Minister

Ye. Birtanov

Approved
by the order of the
Minister of Healthcare of the
Republic of Kazakhstan dated
November 20, 2019
No. ҚР ДСМ -144

Standard for organizing the provision of medical care in case of infectious diseases in the Republic of Kazakhstan Chapter 1. General Provisions

1. The Standard for organizing the provision of medical care in case of infectious diseases in the Republic of Kazakhstan has been developed in accordance with subclause 6) of clause 1 of article 7 of the Code of the Republic of Kazakhstan dated September 18, 2009 "On Public Health and Healthcare System".

2. This Standard shall establish the rules, general principles and characteristics for organizing the provision of medical care in the Republic of Kazakhstan in case of infectious diseases at outpatient-polyclinical, inpatient and hospital-replacing levels, notwithstanding the form of ownership and departmental subordination.

3. Terms and definitions, used in these Standard are:

1) a contact – a person, who is and (or) has been in contact with the source of the infectious agent;

2) a specialized professional – a medical worker with higher medical education, who has a certificate on a certain specialty;

3) qualified medical care - medical care, provided by medical workers with higher medical education for diseases that do not require specialized methods of diagnosis, treatment and medical rehabilitation, including the use of telemedicine;

4) a Portal Bureau of hospitalization (hereinafter referred to as the Portal) – a unified system of electronic registration, recording, processing and storing of referrals of patients for hospitalization in a hospital within the framework of the guaranteed volume of free medical care;

5) voluntary treatment – treatment carried out with the consent of the patient or his/her legal representative;

6) consultative-diagnostic care (hereinafter referred to as the CDC) – specialized medical care including using high-tech medical services without round-the-clock medical supervision;

7) specialized medical care – medical care, provided by specialized professionals for diseases, requiring special methods of diagnostics, treatment and medical rehabilitation, including using telemedicine means;

8) primary medical care (hereinafter referred to as the PMC) – pre-medical or qualified medical care without round-the-clock medical supervision, including a range of available medical services provided at the level of the individual, family and society;

9) medical organization (hereinafter referred to as the MO) - a healthcare organization, the main activity of which is the provision of medical care

10) inpatient care – a form of provision of pre-medical, qualified, specialized medical care, including using the high-tech medical services, with round-the-clock medical supervision;

11) guaranteed volume of free medical care (hereinafter referred to as the GVFMC) – a volume of medical care, which is provided at the expense of budget funds in accordance with the Resolution of the Government of the Republic of Kazakhstan dated December 15, 2009 No. 2136 "On approval of the list of guaranteed volume of free medical care", to the citizens of the Republic of Kazakhstan, oralmans, as well as to foreigners and stateless persons, who

permanently reside in the territory of the Republic of Kazakhstan of the Republic of Kazakhstan.

Chapter 2. General rules for provision of medical care for infectious diseases

1. PMC to patients with infectious diseases shall be provided by doctors on specialty "General Medicine" (Adolescent General Medicine, Dietetics), "Pediatrics" (Neonatology), "General Medical Practice" (Family Medicine), as well as at feldsher-midwife stations and medical units by feldshers and nurses in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated April 28, 2015 No. 281 "On approval of the Rules for provision of primary medical care and Rules for registration of citizens to primary medical care organizations" (registered in the Register of State Registration of Regulatory Legal Acts as No. 11268), as well as in accordance with the list of GVFCM, approved by the Resolution of the Government of the Republic of Kazakhstan dated December 15, 2009 No. 2136 "On approval of the List of Guaranteed Volume of Free Medical Care".

2. The planned hospitalization shall be carried out through the Portal by results of clinical-laboratory indicators to perform complex therapy in a round-the-clock hospital with the following nosologies: chronic brucellosis (stage of subcompensation), chronic viral hepatitis (with a weak and moderate degree of activity), helminthiasis.

3. Inpatient care to the patients with infectious diseases shall be carried out in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated September 29, 2015 No. 761 "On approval of the Rules for provision of inpatient care" (registered in the Register of State Registration of Regulatory Legal Acts as No.12204) and in accordance with the CP.

4. Emergency hospitalization of patients with urgent conditions requiring resuscitation shall be carried out in the nearest hospital.

5. Paid medical services to the patients with infectious diseases shall be provided by medical organizations in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated April 30, 2015 No. 304 "On approval of the Rules and conditions for provision of paid services in healthcare organizations" (registered in the Register of State Registration of Regulatory Legal Acts as No.11341).

6. Medical care in conditions of hospital-replacing care in a day-patient facility and home care shall be provided by PMC specialists (primary care physicians, pediatricians, general practitioners, paramedics, obstetricians, social health workers and nurses), consultations of specialized professionals shall be carried out according to medical indications.

Chapter 3. General principles and characteristics of the activity of medical organizations, providing medical care for infectious diseases

7. General principles of activity of the MO, which provide medical care to the population for infectious diseases, shall be:

1) diagnostics and treatment of infectious diseases and especially dangerous infections (hereinafter referred to as the EDI) – careful collection of anamnesis, including epidemiological analysis, laboratory and instrumental examination of treatment measures in accordance with clinical protocols (hereinafter referred to as the CP);

2) dynamic monitoring of patients with infectious diseases – conducting additional examination of patients to exclude or establish an infectious disease;

3) organizing and carrying out activities aimed at information and explanatory work on the prevention of infectious diseases - timely detection of sick people, assessment of the risk of infection of others and the spread of infection, isolation of contagious patients and identification of contact, preventive vaccinations, sanitary-anti-epidemic and sanitary-preventive measures in the foci of infectious diseases, promotion of a healthy lifestyle and recommendations for healthy nutrition.

8. Medical care to the patients with infectious diseases shall be provided by the specialists with higher medical education on specialties "Infectious Diseases" (including pediatric ones) (hereinafter referred to as the infectious disease physician), on specialties "General Medical Practice" (Family Medicine), "General Medicine" (Adolescent General Medicine, Dietetics), " Pediatrics" (Neonatology), "Emergency and Urgent Medical Care".

9. Execution of medical documentation and maintenance of accounting and reporting documentation shall be carried out in accordance with the order of the Acting Minister of Healthcare of the Republic of Kazakhstan dated November 23, 2010 No. 907 "ON approval of the forms of primary medical documentation of healthcare organizations " (registered in the Register of State Registration of Regulatory Legal Acts as No.6697) (hereinafter referred to as the Order No. 907).

10. Medicament provision of patients with infectious diseases in the healthcare organizations within the framework of the GVFCM, and (or) in the CSHI system shall be carried out based on drug formularies, in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated May 22, 2015 No. 369 "On approval of the Rules for formation of Kazakhstan National Drug Formulary, the list of medicines and medical equipment for free and (or) preferential outpatient provision of certain categories of citizens with certain diseases (conditions), as well as the development of medicinal formulary for healthcare organizations" (registered in the Register of State Registration of Regulatory Legal Acts as No.11429).

Paragraph 1. Provision of medical care to patients with an infectious disease at the outpatient-polyclinical level

11. Outpatient-polyclinical care to the patients with infectious diseases shall include PMC and CDC.

12. Primary diagnosis and outpatient care for patients with an infectious disease shall be carried out in organizations that provide PMC:

1) at district level – at medical and feldsher-midwife stations (hereinafter referred to as the FMS), an outpatient clinic, a PMC center, district and numbered district polyclinics;

2) at the city level – at an outpatient clinic, in a PMC center, a city polyclinic;

3) emergency medical care (hereinafter referred to as the EMC) and care in the form of sanitary aviation to the patients with infectious diseases shall be carried out in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated July 3, 2017 No. 450 "On approval of the Rules for provision of emergency medical care in the Republic of Kazakhstan" (registered in the Register of State Registration of Regulatory Legal Acts as No.15473) (hereinafter referred to as the Order No. 450) and shall include the round-the-clock medical care to adult and child population with life-threatening (patient and (or) surrounding) conditions, acute severe infectious diseases, both in the epidemic focus and during evacuation.

13. Medical care, provided to patients with an infectious disease by PMC specialists, shall include:

1) examination of the patient for the purpose of early detection of infectious diseases, determining the patient's condition and establishing a diagnosis;

2) collection of an epidemiological anamnesis;

3) identification and monitoring of contact persons;

4) provision of emergency and urgent medical care;

5) compliance with the anti-epidemic regime;

6) referral of patients to laboratory and instrumental research methods, in accordance with the assessment of the risk of infection of others and the spread of infection;

7) selection and prescription of treatment in accordance with the CP;

8) making prescriptions for medicines to patients;

9) organization of collection and delivery of biomaterial for research in the laboratory in accordance with the assessment of the risk of infection of others and the spread of infection;

10) home care for patients with conditions that threaten others (contact with infectious patients, the appearance of a rash on the body for no reason; infectious diseases before the end of the incubation period), deterioration after vaccination;

11) transmission of an emergency notification in case of suspicion and / or establishment of an infectious disease in accordance with the order of the Acting Minister of Healthcare of the Republic of Kazakhstan dated September 16, 2019 No. ҚР ДСМ-127 "On approval of the Rules for registration, keeping records of cases of infectious, parasitic, occupational diseases and poisoning, and the Rules for reporting on them" (registered in the Register of State Registration of Regulatory Legal Acts as No.19383) (hereinafter referred to as the Order No. 127);

12) referral of the patient for hospitalization in the presence of clinical and / or epidemiological indications;

13) conducting primary anti-epidemic measures (work in a center of infection), according to the assessment of the risk of infection of others and the spread of infection shall be carried out in accordance with the order of the Acting Minister of Healthcare of the Republic of Kazakhstan dated March 27, 2018 No.126 "On approval of sanitary Rules "Sanitary and epidemiological requirements for the organization and conduct of sanitary and anti-epidemic and sanitary-preventive measures to prevent infectious diseases" (registered in the Register of State Registration of Regulatory Legal Acts as No.16793) (hereinafter referred to as the Order No. 126), Order of the Minister of Healthcare of the Republic of Kazakhstan dated April 18, 2018 No. 175 "On approval of sanitary Rules "Sanitary and epidemiological requirements for the organization and conduct of sanitary and anti-epidemic and sanitary-preventive measures to prevent parasitic diseases" (registered in the Register of State Registration of Regulatory Legal Acts as No.16991) (hereinafter referred to as the Order No. 175), Order of the Acting Minister of Healthcare of the Republic of Kazakhstan dated October 4, 2019 No. ҚР ДСМ-135 "On approval of sanitary Rules "Sanitary and epidemiological requirements for the organization and conduct of sanitary and anti-epidemic and sanitary-preventive measures for patients with vaccine-preventable infectious diseases" (registered in the Register of State Registration of Regulatory Legal Acts as No.19454) (hereinafter referred to as the Order No. 135);

14) conducting temporary disability examination in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated March 31, 2015 No. 183 "On approval of the Rules for temporary disability examination, issuance of a sick leave and a certificate of temporary disability" (registered in the Register of State Registration of Regulatory Legal Acts as No.10964) (hereinafter referred to as the Order No. 183);

15) selection and referral for consultation to an infectious disease physician to determine subsequent tactics of supervising and treating the patient, in accordance with the assessment of the risk of infection of others and the spread of infection;

16) using standard determination of a case at suspicion on EDI.

14. When a suspected case (suspicion) of EDI is identified, the PMC doctor and / or specialized professional shall inform the management, the management shall call the EMC for evacuation to the infectious diseases hospital and shall issue an emergency notification to the territorial subdivision of the department of the state body in the field of sanitary and epidemiological welfare of population of the relevant territory according to the order of the Minister of National Economy of the Republic of Kazakhstan dated February 25, 2015 No. 131 "On the approval of sanitary rules "Sanitary and epidemiological requirements for the

organization and implementation of sanitary and anti-epidemic (preventive) measures to prevent infectious diseases (plague, cholera)" (registered in the Register of State Registration of Regulatory Legal Acts as No.10644) (hereinafter referred to as the Order No.131).

15. The PMC doctor and / or specialized professional when a suspected case (suspicion) of EDI is established, shall:

- 1) isolate the patient in a room, stopping entry and exit to / from the office;
- 2) request personal protection equipment in accordance with the infection risk assessment;
- 3) send to a specialized hospital / department;
- 4) conduct medical supervision of contact, in accordance with the incubation period of the disease.

16. The MO management when establishing a suspicious case (suspicion) of EDI, shall organize a system of measures, stipulated by the operational plan, which includes:

- 1) transmitting personal protection devices to the doctor, who detected the EDI patient;
- 2) stopping movement inside the organization, entrance and exit from/to the organization;
- 3) calling a special ambulance team to evacuate the patient;
- 4) evacuation of the patient to the nearest infectious hospital, provided for by the operational plan, in compliance with the regime requirements;
- 5) calling a special team of epidemiologists to carry out anti-epidemic measures to the full extent;
- 6) final disinfection.

17. CDC shall be provided to infectious patients by infectious disease physicians at the level of:

- 1) a district, city polyclinics;
- 2) consultative-diagnostic centers;
- 3) healthcare organizations and (or) their structural subdivisions providing inpatient care.

18. CDC shall be provided to patients with an infectious disease by infectious disease physician:

- 1) in cases of patient's self-referrals;
- 2) upon detection (suspicion) of an infectious disease in a patient on the referral of PMC specialists and doctors of other specialties;

19. CDC shall be provided by an infectious disease physician in accordance with the order of the Acting Minister of Health and Social Development of the Republic of Kazakhstan dated July 28, 2015 No. 626 "On approval of the Rules for provision of consultative-diagnostic assistance" (registered in the Register of State Registration of Regulatory Legal Acts as No.11958), in accordance with the CP and includes:

- 1) specialized medical care to the patients with infectious diseases;
- 2) assessment of risk and spread of infection;

3) transmitting an emergency notification in case of suspicion and / or establishment of an infectious disease according to Order No. 127, in the form No. 090/y approved by Order No. 907;

4) organization and conduct of laboratory and instrumental studies for patients according to CP, as well as in accordance with the assessment of the risk and spread of infection;

5) referral of patients for examination and consultation with specialized specialists according to indications;

6) determination of the availability of medical and epidemiological indications for emergency and planned hospitalization of patients in a specialized hospital;

7) making a prescription for medicines and medical devices to the patients with infectious diseases in the drug supply information system;

8) participation in the conduct of primary anti-epidemic measures (work in the focus of infection) according to Order No. 126, Order No. 175 and Order No. 135;

9) introduction into practice of new methods of prevention, diagnosis and treatment of patients with infectious diseases;

10) conducting consultations of PMC specialists;

11) carrying out examination of temporary disability, with issuance of a sick leave and certificate of temporary disability in accordance with Order No.183;

12) referral to PMC specialists in identifying signs of disability in patients with an infectious disease to draw up documentation for a medical and social expert commission in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated January 30, 2015 No. 44 "Rules for medical and social examination" (registered in the Register of State Registration of Regulatory Legal Acts as No.10589);

13) Participation in drawing up an operational action plan in case of detection / suspicion of EDI;

14) consulting assistance to PMC specialists in carrying out preventive vaccination.

20. Provision of specialized CDC infectious patients shall be carried out by infectious disease physicians. Staff standards of the department shall be established in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated April 7, 2010 No. 238 "On approval of the standards for provision of regions with medical workers" (registered in the Register of State Registration of Regulatory Legal Acts as No.6173).

21. Patient admission to the CDC shall be carried out in the office of an infectious disease physician (hereinafter referred to as the OI DP) in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated May 31, 2017 No. 357 "On approval of sanitary Rules "Sanitary-epidemiological requirements to healthcare facilities" (registered in the Register of State Registration of Regulatory Legal Acts as No.15760) (hereinafter referred to as the Order No. 357).

22. Furnishing the OI DP, where admission of a patient with an infectious disease is carried out shall be made in accordance with the Appendix 1 to this Standard, as well as

furnishing of an isolation unit for a patient with EDI shall be carried out according to Appendix 2 to this Standard.

23. In the presence of medical and epidemiological indications, an infectious disease physician shall decide on the organization and conduct of additional examination or hospitalization in the specialized department of the hospital for the provision of inpatient specialized medical care, taking into account the assessment of the risk of infection of others and the spread of infection.

24. During the period of the rise in the mass incidence of acute respiratory viral and airborne infections, patients with a rise in body temperature shall be examined by a doctor in a filter cabinet at the PMC level.

25. If an EDI infectious disease physician and / or specialized professional is identified (suspected) in a patient, the CDC physician and / or specialized professional shall inform the management, the management calls the EMC for evacuation to the infectious diseases hospital and shall submit an emergency notification to the territorial subdivision of the department of the state body in the field of sanitary-epidemiological welfare of population of the corresponding territory according to Order No. 131.

Paragraph 2. Provision of medical care to patients with infectious disease at the inpatient level

26. Inpatient care for the population with an infectious diseases shall be carried out in the following organizations:

1) at the district level – district hospital, numbered district hospital, multidisciplinary interdistrict hospital;

2) at the city level - a city hospital, a multidisciplinary city hospital, a multidisciplinary city children's hospital.

27. Medical indication for hospitalization to the hospital shall be the need to provide qualified, specialized medical care with round-the-clock supervision:

1) an epidemiological indication for hospitalization of a patient with an infectious disease shall be the risk of spreading the infection among others;

2) suspicion of EDI in a patient shall be an absolute indication for hospitalization.

28. When a patient with an infectious disease is admitted for inpatient treatment, an infectious disease doctor shall be examined in the admission department in order to determine a preliminary diagnosis, assess the risk of infection of others and the spread of infection, the severity of the condition, determine the necessary personal protective equipment, and draw up a plan for examination and treatment. In the presence of medical indications and written consent to the provision of medical care to him/her, he/she is hospitalized in a specialized department with the filling out of a medical record of an inpatient in the form 003/y, approved by Order No. 907.

29. Patient with contagious EDI shall be hospitalized / isolated regardless of the patient's consent.

30. Patient's triage according to the severity of condition shall be carried out in the admissions office of a multidisciplinary hospital and shall be regulated by Order No. 450.

31. Patients with suspicion / presence of contagious EDI shall be admitted in a special box with 24/7 readiness, hospitalized in a boxed ward.

32. If a somatic patient is diagnosed with an infectious disease that poses a danger to others, the patient shall be isolated with subsequent transfer to the infectious diseases department of a general hospital.

33. The provision of medical care to pregnant women, women in labor with an infectious pathology shall be carried out in accordance with the Order of the Minister of Healthcare of the Republic of Kazakhstan dated April 16, 2018 No. 173 "Standard for the provision of obstetric and gynecological care in the Republic of Kazakhstan" (registered in the Register of State Registration of Regulatory Legal Acts as No. 16854) and the current CP.

34. Procedure for hospitalization of pregnant women with infectious pathology:

1) in the presence of a dominant infectious pathology before 36 weeks of pregnancy, it shall be carried out in infectious diseases hospitals or infectious diseases departments of multidisciplinary hospitals;

2) from 36 weeks of pregnancy, hospitalization is carried out at the inpatient level of MO, providing obstetric and gynecological care;

3) in special cases (highly contagious, especially dangerous infectious pathology), the decision on the place of hospitalization shall be made by a commission.

35. Pregnant women with suspicion / presence of contagious EDI, shall be admitted in the same way as other such patients in a special box with a round-the-clock readiness, hospitalized in the boxed ward.

36. If a patient refuses medical care with an infectious disease (with the exception of EDI and infections that pose a danger to others) or his/her legal representative, an entry shall be made in the medical record of an inpatient or outpatient patient with an indication of possible complications and consequences. The patient or his/her legal representative shall write a statement of refusal from medical assistance and shall certify it with his/her signature. The statement shall be stored in the patient's medical record.

37. Patients with EDI and infections that pose a risk to others shall be admitted to the boxed EDI unit. An individual post shall be created for the patient with EDI. The EDI diagnosis shall be carried out according to the standard case definitions according to the CP. The organization of medical and emergency care for EDI patients shall be carried out in accordance with the CP, assessment of the risk of infection and spread of infection and an anti-epidemic regime. The following activities shall be carried out in a medical organization:

1) operational action plans in cases of admission of an EDI patient, including the composition of the staff are developed;

2) regularly, but at least once a year, exercises are conducted with the introduction of a conditional patient to practice actions upon admission of an EDI patient;

3) in the event of an EDI case / outbreak, a headquarters is created to control the conduct of all activities in the focus and the opening of the epidemic focus is announced;

4) the personnel works in personal protection equipment in accordance with the assessment of the risk of infection;

5) the principle of pairing is observed - at least two medical workers always enter an isolated box where the patient is located;

6) duration of continuous work in personal protective equipment of maximum isolation (anti-plague suit of the first type) - no more than 2 hours;

7) the issue of the necessary laboratory and instrumental research methods is being resolved in accordance with the assessment of the risk of infection and the anti-epidemic regime;

8) in the event of a highly contagious EDI, a decision is made to select a special unit, consisting of several isolated boxes, if it is possible to isolate it from the rest of the department, or to completely empty the entire department, so that laboratory-clinical and biochemical, as well as instrumental examinations shall be carried out on the spot without taking out the infectious material from the epidemic focus;

9) laboratory and etiological studies shall be carried out in the regional EDI laboratory and the material from the patient shall be delivered there in accordance with the existing regime requirements in triple packaging and disinfection of the outer surface of the containers in accordance with the order of the Minister of Healthcare of the Republic of Kazakhstan dated December 14, 2018 No. ҚР ДСМ-40 "On approval of sanitary rules "Sanitary and epidemiological requirements for the organization and conduct of sanitary and anti-epidemic, sanitary and preventive measures to prevent especially dangerous infectious diseases" (registered in the Register of State Registration of Regulatory Legal Acts as No. 17995) (hereinafter referred to as the Order No. ҚР ДСМ-40).

38. Sanitary and epidemiological requirements for healthcare facilities providing medical care for infectious diseases are established in accordance with Order No. 357.

39. In a multidisciplinary hospital, including in the intensive care unit (hereinafter referred to as the ICU), separate boxed wards shall be allocated for infections transmitted by airborne droplets and fecal-oral routes:

1) patients with EDI are hospitalized / isolated in separate isolated boxes with exit to the street;

2) the level of isolation of the patient and the personal protection equipment used by medical personnel is determined by an assessment of the risk of contamination of others.

40. In infectious diseases hospitals in the absence of an ICU, intensive therapy wards are organized (hereinafter referred to as the ITW). Specialized medical care for infectious patients at ITW is provided by doctors in the specialty "Infectious Diseases" (including children) who have a certificate of advanced training in the amount of at least 216 hours in the cycle "Emergency care for infectious diseases" and / or doctors specializing in "Anesthesiology and

reanimation", having a certificate of advanced training in the amount of at least 216 hours in the cycle "Topical issues of infectious diseases". In multidisciplinary hospitals, according to epidemiological indications, ITWs are organized in specialized departments for the prevention of nosocomial spread of infection.

41. EDI infection control shall be carried out in accordance with the Order No. ҚР ДСМ-40 and Order no.131.

42. Discharge of infectious patients shall be carried out according to Order No. 761, as well as CP for relevant nosologies.

43. After the completion of the provision of specialized medical care in inpatient conditions, the patient shall be issued a discharge summary from the inpatient's medical record, approved by Order No. 907, with the results of the examination and treatment, recommendations for further tactics of managing the patient at the outpatient level. Patient information shall be forwarded to the PMC organization at the point of attachment.

Paragraph 3. Provision of hospital-replacing care to patients with infectious diseases

44. Hospital-replacing care shall be provided to patients in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated August 17, 2015 No. 669 "On approval of the Rules for provision of hospital-replacing care" (registered in the Register of State Registration of Regulatory Legal Acts as No.12106).

45. Hospital-replacing care to the patients with infectious diseases shall be carried out within the framework of GVFMC and (or) in the CSHI system and shall be provided in a day hospital and / or home hospital according to the referral of a PMC specialist or a medical organization with the results of laboratory, instrumental studies and consultations of specialized specialists on the following nosologies: chronic brucellosis (stage of subcompensation), chronic viral hepatitis (with a weak and moderate degree of activity), erysipelas, erythematous form, chronic helminthiasis in accordance with the assessment of the risk of infection of others and spread of infection.

46. Upon admission of a patient to a day hospital, to a hospital at home a day hospital (polyclinic, hospital), home hospital patient's card according to the form No. 003-2 / y, approved by order No. 907 shall be completed.

47. Contraindications for provision of hospital-replacing care shall be:

- 1) diseases requiring round-the-clock medical procedures and medical supervision;
- 2) infectious diseases during the period of epidemiological danger;

3) diseases that pose a danger to others, in accordance with the order of the Minister of Health and Social Development of the Republic of Kazakhstan dated May 21, 2015 No. 367 "On approval of the list of socially significant diseases and diseases that pose a danger to others" (registered in the Register of State Registration of Regulatory Legal Acts as No.11512).

48. When providing hospital-replacing care in a day hospital and a hospital at home, the doctor examines the patient, adjusts the treatment, if necessary, prescribes additional laboratory, instrumental examinations and consultations of specialized specialists, in accordance with the standards for organizing the provision of medical care of specialized services and guided by clinical diagnostic protocols and treatment. Upon detection of the facts of violence and bodily injury, it provides medical and preventive assistance, conducts medical rehabilitation, notifies the internal affairs bodies about the facts of the treatment of victims and the provision of medical assistance to them.

49. The day hospital is intended for carrying out treatment measures for patients from 3 years old who do not require round-the-clock medical supervision.

1) if the condition worsens, requiring round-the-clock observation, the patient shall be hospitalized in a hospital.

2) the duration of the patient's treatment in the day hospital shall be no more than 8 working days.

50. Indications for managing a patient in a hospital at home shall be organ dysfunctions that impede the daily visit of the day hospital by the patient if it is necessary to receive hospital-substituting medical care, as well as the presence of orphan (rare) diseases in children associated with a high risk of infectious complications and requiring isolation during the period of seasonal viral infections. Diseases, to receive regular replacement enzymatic and antibacterial therapy.

51. The duration of treatment in a hospital at home shall be at least 3 working days and in case of acute diseases not more than 5 working days, in case of exacerbation of chronic diseases not more than 8 working days.

52. When discharging a patient who has received inpatient care, a statistic card of the patient who has undergone treatment in a day hospital and in a hospital at home is filled in according to the form 066-4/y, approved by Order No. 907.

Appendix 1
to the Standard for organizing the
provision of medical care in case
of infectious diseases in the
Republic of Kazakhstan

Furnishing of the office of an infectious disease physician

Item No.	Medical devices	Number of devices
1	2	3
1.	Irradiator screened bactericidal stationary	1
	General medical set	
2.	Medical couch	1
3.	Medical doctor's table	1
4.	Medical nurse's table	1

5.	Medical doctor's chair	1
6.	Medical nurse's chair	1
7.	Patient's chair	2
8.	Medical screen	1
9.	Medical cabinet for documentation	1
10.	Medical wardrobe for clothes, one-leaf	1
	A doctor's care set for an adult infectious disease physician	
11.	Measuring tape	1
12.	Kidney dish	1
13.	Stopwatch	1
14.	Glass for disinfection solution	1
15.	Medical thermometer	5
16.	Tonometer	1
17.	Phonendoscope	1
18.	Medical tongue depressor	1
19.	Negatoscope	1
20.	Anti-plague kit	
21.	A set of modern means of individual protection (overalls, N95 respirators, glasses, gloves, armbands, aprons, shoe covers)	1
22.	Packs for sampling material - blood, bubo punctate, sputum, smears, feces, vomit / wash water	1
23.	Transport kits for packaging material from patients	1
24.	Disposable EDI Patient Transport Kit	3
25.	Antiseptic dispenser	1
26.	Liquid soap dispenser	1
27.	Container for piercing objects	1
28.	Containers for clean / dirty gloves	1
29.	Containers for clean / dirty shoe covers	1
30.	Biological waste containers / bags	1
31.	Disinfectant dilution containers	1
32.	Surface treatment wipes	1
33.	Sprayer for room treatment	1
34.	Sink in the room	1
35.	Separate sanitary conveniences	1
36.	Fridge freezer	1
37.	Refrigerator bag with ice packs	1
38.	Thermal container	1
39.	Thermostat	1
40.	The presence of a separate exit to the street	
	A doctor's care set for a child infectious disease physician	
41.	Measuring tape	1
42.	Kidney dish	1

43.	Stopwatch	1
44.	Glass for disinfection solution	1
45.	Medical thermometer	5
46.	Tonometer with a cuff for children under one year old	1
47.	Phonendoscope	1
48.	Stethoscope	1
49.	Medical tongue depressor	20
50.	Negatoscope	1
51.	Medical scales with stadiometer	1
52.	Electronic scales for newborns	1
53.	Pediatrician's tool kit	1
54.	Baby changing table	1
55.	Anti-plague kit	1
56.	A set of modern means of individual protection (overalls, N95 respirators, glasses, gloves, armbands, aprons, shoe covers)	1
57.	Packs for sampling material - blood, bubo punctate, sputum, smears, feces, vomit / wash water	1
58.	Transport kits for packaging material from patients	1
59.	Disposable EDI Patient Transport Kit	5
60.	Antiseptic dispenser	2
61.	Liquid soap dispenser	2
62.	Container for piercing objects	2
63.	Containers for clean / dirty gloves	2
64.	Containers for clean / dirty shoe covers	2
65.	Biological waste containers / bags	2
66.	Disinfectant dilution containers	1
67.	Surface treatment wipes	1
68.	Sprayer for room treatment	1
69.	Sink in the room	1
70.	Separate sanitary conveniences	1
71.	Fridge freezer	1
72.	Refrigerator bag with ice packs	1
73.	Thermal container	1
74.	Thermostat	1
75.	The presence of a separate exit to the street	

Appendix 2
to the Standard for organizing the
provision of medical care in case
of infectious diseases in the
Republic of Kazakhstan

Furnishing the isolation ward for a patient with EDI

--	--

Item No.	Medical devices	Number of devices
1	2	3
1	Irradiator screened bactericidal stationary	1 in each box / ward
2	Medical stand (infusion stand)	1
3	Anti-plague suit (personal protective equipment - masks, overalls, glasses, disposable gloves, rubber shoes)	5
4	A set of modern means of individual protection (overalls, N95 respirators, glasses, gloves, armbands, aprons, shoe covers)	1
5	Packs for sampling material - blood, bubo punctate, sputum, smears, feces, vomit / wash water	1
6	A set of containers for packaging material from patients	1
7	Bedpan	1
8	Antiseptic dispenser	1
9	Liquid soap dispenser	1
10	Functional bed	1
11	Medical thermometer	10
12	Disposable EDI Patient Transport Kit	3
13	A set for a collection of bacterial material from a patient with especially hazardous infection	1
14	A kit for delivery of bacterial material to a laboratory	1
15	Ambulance and Emergency Medicine Kit	1
16	Refrigerator bag with ice packs	1
17	Thermal container	3
18	Medical tool table	1
19	Enamel kidney dish (basin)	2
20	Container for piercing objects	2
21	Containers for clean / dirty gloves	2
22	Containers for clean / dirty shoe covers	2
23	Biological waste containers / bags	2
24	Disinfectant dilution containers	1
25	Surface treatment wipes	1
26	Sprayer for room treatment	1
27	Sink in the room	1
28	Separate sanitary conveniences	1
29	Refrigerator bag with ice packs	1
30	Thermostat	1
31	The presence of a separate exit to the street	

