

SOP FOR BURIAL DUE TO CORONA VIRUS – DHAI-R

1. These guidelines have been issued by DHAI-R to provide comprehensive information on the safe management of burial of the COVID-19 victims. Intended users of these guidelines are medical personnel, Administrative personal involved in handling the deceased and anyone involved in the management of confirmed cases of COVID-19.

2. **Prior to Procedure.** Only trained personnel should handle the remains of confirmed case and handling should be kept minimum. Cultural, religious and family concerns should be taken into account before starting procedure. An informed written consent / agreement should be made between health personnel and family. Due respect should be shown to relatives of the deceased in terms of their religious and personal rights.

3. **Burial Team Composition**

- a. 4 x members, wearing full PPE (Per Protective Equip) for field situation (Detailed by respective phase).
- b. 1x sprayer, wearing full PPE for field situation (Detailed by respective phase).
- c. 1x technical supervisor, not wearing PPE (Detailed by respective phase)
- d. 1x communicator, a person who interact with family and community, not wearing PPE (NCO/ JCO respective phase).
- e. 1x religious representative, not wearing PPE (Respective Khateeb).

4. **Step-1: Team Composition and Preparation.** PPE (as per requirement of team member's role). Every member of team should be clear of his / her duties (Sprayer, technical supervisor, communicator and religious representative and a family member if situation demands). Disinfectant solution (0.05% chlorine for hand hygiene and 0.5% chlorine solution for disinfection of objects and surfaces)

5. **Step-2: Assembling Necessary Equipment**

- a. Body bag should be able to hold up to 125 KG, with handles to allow safe hand carry. For hand hygiene, arrange 60% minimum alcohol-based hand rub solution, clean running water with soap and paper towel, if not available chlorine (0.05%) can be considered (Use of bleach is also recommended).
- b. PPE includes, well fitted pair of disposable gloves, disposable overall, plastic apron and facemask.
- c. One back sprayer (Manpacked sprayer).
- d. Waste management tools include, one hand sprayer with 0.05% chlorine. And two leak proof waste bags (one for disposable material

meant for destruction and one for re-usable material meant for disinfection).

6. **Step-3: Arrival, Preparation for Burial with Family and Risk Evaluation**

- a. Team leader or technical supervisor shall brief the team and everyone must be clear of their role and responsibility. Team communicator should reach out for formal agreement with the family. Dignified burial should be observed in any case and family members should be allowed to witness and make pictures of the proceedings. Identify the family member who will be participating in touching, bathing and burial. White shroud (cloth) can be used. Female members should be involved in female deceased burial.
- b. For risk evaluation, identify room in the house of the deceased patient. Evaluate the size and weight of the deceased. Identify the area of house used by the patient and family members/ people exposed to him/ her. Ensure family members wearing gloves and PPE while handling body.

7. **Step-4: Sanitize Family Environment**

- a. Collect soiled objects, disinfect if needed or burn if objects are visibly soiled with urine, stool, vomit, nasal secretion etc.
- b. Clean the area with clean water then disinfect the environment i.e. rooms and house with suitable disinfectant (chlorine 0.5% solution).
- c. Collect soiled objects and pack in bag for burial or disinfection.
- d. All places in the home are checked for disinfection before removing PPE.

8. **Step-5: Remove PPE, Manage Waste & Perform Hand Hygiene**

- a. Remove boots after disinfecting them. Remove apron and gloves from inside out. Remove mask and goggles from behind the head. Remove inner gloves and wash hands using water and soap.
- b. Recover the PPE in an appropriate waste bag. Bag will be closed, disinfected and brought back for burning.
- c. Recover all reusable objects and instruments, disinfect and kept in an appropriate bag to bring back for safe custody.
- d. Perform hand hygiene.

9. **Step-6: Wear Glove and Transport Coffin to Cemetery**

- a. Coffin to be transported in a dedicated transport vehicle for carrying dead bodies.
- b. For transportation of coffin, wear household gloves and make sure it is not soiled.

- c. Family members will also wear gloves who are involved in burial procedure and their frequent hand washing should be ensured.
- d. Decontaminate and handle the coffin delicately.
- e. Respect time for prayers and grieving.

10. **Step-7: Burial and Prayers at Cemetery**

- a. Depending on the customs in place, respect rituals and allow notified family member to place body / coffin in grave.
- b. Family member should be allowed to close the grave and offer prayers as it dissipates tension.
- c. Place gloves in an appropriate bag for disinfection.
- d. All the team members and designated family members to wash hands with appropriate disinfectant.
- e. Burial team to offer condolence and thank the family before leaving.

11. **Step-8: Return to Hospital / Team Office**

- a. All reusable objects are again disinfected and dried.
- b. All disposable objects must be sent for incineration.
- c. Vehicle used should be cleaned and disinfected.
- d. At the end of the day, all members should wash hands.
- e. Any samples meant to test should be sent to laboratory.

12. **DO's of Safe Burial**

- a. Keep family informed and engaged.
- b. Always greet the family after reaching and offer condolence before starting procedure.
- c. Keep religious representative along to avoid conflict.
- d. Avoid too much manipulation of the body.
- e. Remains should be sprayed, washed or embalmed.

Note: Thank the family members for their consent and cooperation / contribution.

13. **Don'ts of Safe Burial**

- a. Do not arrive at deceased patient house with PPE on.
- b. Do not enter deceased patient areas without PPE on.
- c. Do not start procedure without family consent.

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