**Situation Update #120 - Coronavirus Disease 2019 (COVID-19)**

**WHO Country Office for Nepal**

**Reporting Date:** 25 - 31 July 2022 (EPI Week 30)

**HIGHLIGHTS**

*(Data published in the MoHP Situation Report as of 31 July 2022 and same data published in EDCD Report as of 01 August 2022)*

- Of the total RT-PCR confirmed COVID-19 cases, 98.3% (986,596) of cases have recovered, 0.5% (4,567) are active cases and 1.2% (11,967) are deaths.
- Among the total active cases, 96.8% (4,424) cases are in home isolation; 3.2% (143) of cases are undergoing hospital/institutional isolation of which (23%) 33 patients require ICU admission and 5 patients require ventilator support.
- Kathmandu and Lalitpur districts reported more than 500 active cases.
- Among the new RT-PCR confirmed cases (2,974) reported this week, 50.0% (1,488) are from Kathmandu district followed by Lalitpur district 11.7% (347). Majority of the new cases 65.0% (1,932) have been reported from Kathmandu Valley (Kathmandu, Lalitpur and Bhaktapur), Bagmati Province.

**COVID-19 vaccination coverage status (as of 31 July 2022)**

<table>
<thead>
<tr>
<th></th>
<th>Covi-AstraZeneca</th>
<th>Vero Cell</th>
<th>Janssen</th>
<th>Pfizer</th>
<th>Moderna</th>
</tr>
</thead>
<tbody>
<tr>
<td>First dose</td>
<td>5,464,866</td>
<td>10,347,938</td>
<td>3,476,054</td>
<td>2,521,293</td>
<td>3,216,063</td>
</tr>
<tr>
<td>Second dose</td>
<td>4,746,576</td>
<td>9,222,303</td>
<td></td>
<td>315,243</td>
<td>2,819,189</td>
</tr>
</tbody>
</table>

**NEPAL EPIDEMIOLOGICAL SITUATION**

- Since 9 May 2021, all 7 provinces in the country are experiencing community transmission.
- Since the start of the COVID-19 pandemic, 78.1% (770,610/986,596) of RT-PCR confirmed cases were reported from three provinces, namely- Province 1, Bagmati Province and Lumbini Province. The Kathmandu valley area (Kathmandu, Bhaktapur, Lalitpur) in Bagmati Province has substantially high case load with 43.9% of national total (432,851/986,596), and 81.3% of the provincial total (432,851/532,482).
- Province-wise RT-PCR test positivity rate in Epi Week 30 ranged from 11.9% (Madhesh province) to 45.1% (Gandaki province), with a national positivity rate at 17.0%. Karnali province did not report any RT-PCR test performed in the last week.
• Nepal reported a 34% increase in the number of new RT-PCR confirmed cases (n=2974) in Epi week 30 compared to that in the previous week. Of these total cases reported last week, 86% of the cases have been reported from Province 1, Bagmati, and Lumbini province.
• Nepal reported 11 deaths in Epi week 30, 267% more compared to that in the previous week.

National Influenza Surveillance
• National Influenza Center (NIC)-NPHL reported 23 diagnostic Influenza sample on Epi-week 30 (25 - 31 July 2022). One sample tested positive for Influenza A (H1N1) pdm09 and 1 sample tested Influenza A positive; the subtyping is yet to be done.
• Out of the total SARS-CoV-2 samples that tested negative at NPHL on Epi-week 30, 35 SARS-CoV-2 negative samples were tested for Influenza.
  o All samples were tested negative for both Influenza A and B.
• Provincial Public Health Laboratory (PPHL) - Province 1, Gandaki, Lumbini and Karnali Provinces reported testing of 74 samples for Influenza-SARS-CoV-2 using Multiplex kit on Epi-week 30.
  o All samples tested negative for Influenza A and B and 6 samples tested positive for SARS-CoV-2.
  o A total of 506 samples were tested by PPHLs till 31 July 2022.
• From 3 January 2022 until 31 July 2022:
  o A total of 83 samples tested positive for Influenza (2 Influenza B, 36 Influenza A/H3) , 44 Influenza A(H1N1pdm09) and 1 Influenza (subtyping to be done) from 3,757 samples (Sentinel and non-sentinel samples including SARS-CoV-2 Negative SARI and ILI cases).
  o Similarly, 232 samples tested positive for SARS-CoV-2 from 1201 Influenza negative samples (Sentinel/non-sentinel ILI/SARI samples).1

WHO SEAR countries: Number of COVID-19 confirmed cases and cumulative incidence rate (per 100,000). Link Here- https://worldhealthorg.shinyapps.io/covid/

1 These positive cases are included in the COVID-19 database
Figure 1: RT-PCR confirmed COVID-19 cases and average number of COVID-19 cases over the last seven days, by date of onset/sample/confirmation (N= 986,596) (Data reported on 31 July 2022 up to 19:00:00)

At national level, the first wave of cases between July 2020 and February 2021 was followed by the second wave from the middle of March 2021. Since the middle of December 2021, a third wave of cases soared up exceeding the highest number of single day cases reported in the past surges towards the end of January 2022. Since the middle of May 2022, cases have been steadily rising following an increasing trend.

Figure 2: Cumulative case count of RT-PCR confirmed COVID-19 cases (N= 986,596) (Data reported on 31 July 2022 up to 19:00:00)

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.
The cumulative case incidence has been increasing in Nepal since the first case confirmed on 23 January 2020. Cases have been largely reported from Bagmati Province followed by Province 1 and Lumbini Province.

Figure 3A1: RT-PCR confirmed COVID-19 cases in Province 1: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

There were 335 new cases reported in the past week in Province 1. Cases have decreased by 8% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Province 1 decreased to 34.8% in the past week. A total of 726 tests were performed in the past week, 10% less than that in the previous week.
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Figure 3A2: RT-PCR confirmed COVID-19 cases in Madhesh Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

There were 67 new cases reported in the past week in Madhesh province. Cases have increased by 6% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Madhesh decreased to 11.9% in the past week. A total of 243 tests were performed in the past week, 34% more than that in the previous week.

Figure 3A3: RT-PCR confirmed COVID-19 cases in Bagmati Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date of onset/Date of sample collection/Date of confirmation.
In Bagmati, 2080 new cases were reported in the past week. Cases have increased by 37% in the past week compared to the previous week. There were 6 deaths reported in the past week, 200% more compared to that in the previous week. The test positivity rate in Bagmati increased to 15.3% in the past week. A total of 15,757 tests were performed in the past week, 26% more than that in the previous week.

Figure 3A4: RT-PCR confirmed COVID-19 cases in Gandaki Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

In Gandaki, 256 new cases were reported in the past week. Cases have increased by 53% in the past week compared to the previous week. There were 3 deaths reported in the past week, 200% more compared to that in the previous week. The test positivity rate in Gandaki increased to 45.1% in the past week. A total of 339 tests were performed in the past week, 24% more than that in the previous week.
Lumbini reported 150 new cases in the past week. Cases have increased by 131% in the past week compared to the previous week. There were 2 deaths reported in the past week, compared to none in the previous week. The test positivity rate in Lumbini increased to 29.7% in the past week. A total of 290 tests were performed in the past week, 93% more than that in the previous week.

Figure 3A5: RT-PCR confirmed COVID-19 cases in Lumbini Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 25 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.

Figure 3A6: RT-PCR confirmed COVID-19 cases in Karnali Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

Note: The first case developed symptoms on 3 Jan 2020 in China and was confirmed on 23 Jan 2020 (not shown here). Reference dates used in order of preference as available – Date onset/Date of sample collection/Date of confirmation.
In Karnali, 19 new cases were reported in the past week. Cases have decreased by 90% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Karnali remained stable at 0.0% in the past week with no test performed reported in the past week.

Figure 3A7: RT-PCR confirmed COVID-19 cases in Sudurpaschim Province: Trend of Cases, 7 days Rolling Average, Weekly Cases and Deaths and Test Positivity Rate (Data reported on 31 July 2022)

In Sudurpaschim, 67 new cases were reported in the past week. Cases have increased by 179% in the past week compared to the previous week. There was no death reported in the past week, same as that in the previous week. The test positivity rate in Sudurpaschim increased to 26.3% in the past week. A total of 167 tests were performed reported in the past week, 123% more than that in the previous week.
## Table 1: Summary of confirmed COVID-19 cases, deaths and transmission by provinces (Data reported on 31 July 2022 up to 19:00:00)

<table>
<thead>
<tr>
<th>Reporting Province</th>
<th>Total confirmed cumulative cases RTPCR Tests</th>
<th>Total Confirmed cumulative cases Antigen RDT test</th>
<th>Total confirmed cumulative cases</th>
<th>Total cumulative deaths</th>
<th>Transmission classification</th>
<th>Total confirmed cases in last 14 days Antigen RDT test</th>
<th>Total confirmed cases in last 14 days RT-PCR test</th>
<th>Total confirmed cases in last 14 days</th>
<th>% of total confirmed cumulative cases in last 14 days</th>
<th>Total Deaths in last 14 days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Province 1</td>
<td>128375</td>
<td>29663</td>
<td>158038</td>
<td>14.3</td>
<td>Community transmission</td>
<td>47</td>
<td>699</td>
<td>746</td>
<td>11.7</td>
<td>0</td>
</tr>
<tr>
<td>Madhesh</td>
<td>53474</td>
<td>1161</td>
<td>54635</td>
<td>4.9</td>
<td>Community transmission</td>
<td>2</td>
<td>130</td>
<td>132</td>
<td>2.1</td>
<td>0</td>
</tr>
<tr>
<td>Bagmati</td>
<td>532482</td>
<td>30535</td>
<td>563017</td>
<td>50.8</td>
<td>Community transmission</td>
<td>466</td>
<td>3601</td>
<td>4067</td>
<td>63.8</td>
<td>7</td>
</tr>
<tr>
<td>Gandaki</td>
<td>94240</td>
<td>23113</td>
<td>117353</td>
<td>10.6</td>
<td>Community transmission</td>
<td>228</td>
<td>423</td>
<td>651</td>
<td>10.2</td>
<td>4</td>
</tr>
<tr>
<td>Lumbini</td>
<td>109753</td>
<td>26000</td>
<td>135753</td>
<td>12.2</td>
<td>Community transmission</td>
<td>378</td>
<td>215</td>
<td>593</td>
<td>9.3</td>
<td>2</td>
</tr>
<tr>
<td>Karnali</td>
<td>23951</td>
<td>5944</td>
<td>29895</td>
<td>2.7</td>
<td>Community transmission</td>
<td>41</td>
<td>29</td>
<td>70</td>
<td>1.1</td>
<td>0</td>
</tr>
<tr>
<td>Sudurpashchim</td>
<td>44321</td>
<td>5452</td>
<td>49773</td>
<td>4.5</td>
<td>Community transmission</td>
<td>26</td>
<td>91</td>
<td>117</td>
<td>1.8</td>
<td>0</td>
</tr>
<tr>
<td><strong>National Total</strong></td>
<td><strong>986596</strong></td>
<td><strong>121868</strong>*</td>
<td><strong>1108464</strong></td>
<td><strong>100</strong></td>
<td><strong>Community transmission</strong></td>
<td><strong>1188</strong></td>
<td><strong>5188</strong></td>
<td><strong>6376</strong></td>
<td><strong>100</strong></td>
<td><strong>13</strong></td>
</tr>
</tbody>
</table>

*Total reported in Health Emergency Operation Center (HEOC) Sitrep as of 31 August 2022, 142633 but IMU reported 121868

Notes:
1. The source for case data used in this update is from RT-PCR test positivity reported by laboratories from various locations across Nepal, as shared by HEOC Sitrep; and IMU/IHIMS.
2. Case data is screened and cleaned by our data team for double entry, wrong entry and manual errors such as cities name in place of districts, district name in place of province etc.
3. Whereas the test positivity rate is calculated based on the test positivity reported in Sitrep for RT-PCR which may or may not be scrutinized or cleaned the same way and mark the cases on location of the laboratories rather than their place of residence.
**Figure 4: Distribution of RT-PCR positive COVID-19 cases by age and sex (N= 981,476)** (Data reported on 31 July 2022 up to 19:00:00)

Core epidemiological variables under process for 5120 cases.

*Overall, the sex-distribution remains skewed towards males. The incidence of cases is higher in the economically productive age group (15-54 years) for both males and females.*

**Table 2: Age Specific Case Fatality Ratio and Co-morbidity of Deaths in RT-PCR confirmed COVID-19 cases (N= 986,596)** (Data reported on 31 July 2022 up to 19:00:00)
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A total of 11,967 deaths have been reported. Out of the total deaths, 7,849 (65.6%) were male and 4,118 (34.4%) were female. Amongst the deaths, 3,851 persons (32.2%) had at least one known comorbidity. The age specific case fatality ratio (CFR) progressively increases with age, ranging from 0.06% to 12.1%.

### PREPAREDNESS AND RESPONSE

**What are the Government of Nepal (GoN) & the Ministry of Health & Population (MoHP) doing?**

- Government of Nepal has started COVID-19 vaccination (Pfizer) for the 5 to 11 years population in 2 phases from 23 June 2022.

**What is the WHO Country Office for Nepal doing?**

**Laboratory Diagnosis**

- WHO Nepal has been providing technical support to the National Public Health Laboratory (NPHL) in following activities:
  - Monitoring the quality standard of designated COVID-19 laboratories in the country through the National Quality Assurance Program (NQAP). A total of 8 designated COVID-19 laboratories participated in the NQAP this week. The result of 2 participating laboratories showed 80% concordant, while 6 other participating laboratories showed 100% concordant.
  - Uploading the result of genome sequencing of 48 SARS-CoV-2 samples in GISAID (Global Initiative on Sharing All Influenza Data) platform.

<table>
<thead>
<tr>
<th>Age Group (Years)</th>
<th>Total confirmed cases</th>
<th>Death (male)</th>
<th>Death (female)</th>
<th>Deaths with any known comorbid condition</th>
<th>Age specific case fatality ratio (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-4</td>
<td>9196</td>
<td>16</td>
<td>23</td>
<td>13</td>
<td>0.42</td>
</tr>
<tr>
<td>5-14</td>
<td>33921</td>
<td>13</td>
<td>7</td>
<td>10</td>
<td>0.06</td>
</tr>
<tr>
<td>15-24</td>
<td>149288</td>
<td>92</td>
<td>96</td>
<td>70</td>
<td>0.13</td>
</tr>
<tr>
<td>25-34</td>
<td>273376</td>
<td>386</td>
<td>264</td>
<td>149</td>
<td>0.24</td>
</tr>
<tr>
<td>35-44</td>
<td>203656</td>
<td>875</td>
<td>450</td>
<td>279</td>
<td>0.65</td>
</tr>
<tr>
<td>45-54</td>
<td>142596</td>
<td>1389</td>
<td>644</td>
<td>567</td>
<td>1.43</td>
</tr>
<tr>
<td>55-64</td>
<td>90785</td>
<td>1684</td>
<td>798</td>
<td>771</td>
<td>2.73</td>
</tr>
<tr>
<td>65-74</td>
<td>48955</td>
<td>1632</td>
<td>887</td>
<td>943</td>
<td>5.15</td>
</tr>
<tr>
<td>75-84</td>
<td>23039</td>
<td>1223</td>
<td>654</td>
<td>764</td>
<td>8.15</td>
</tr>
<tr>
<td>85+</td>
<td>6664</td>
<td>520</td>
<td>288</td>
<td>274</td>
<td>12.12</td>
</tr>
<tr>
<td>Unknown</td>
<td>5120</td>
<td>19</td>
<td>7</td>
<td>11</td>
<td>0.51</td>
</tr>
<tr>
<td><strong>National</strong></td>
<td><strong>986696</strong></td>
<td><strong>7849</strong></td>
<td><strong>4118</strong></td>
<td><strong>3861</strong></td>
<td><strong>1.21</strong></td>
</tr>
</tbody>
</table>

**Case Fatality ratio (CFR, in%) = \frac{\text{Number of deaths from disease}}{\text{Number of confirmed cases of disease}} \times 100**

COVID-19 positive lab result is temporally associated with death; causal association under investigation.
• Receiving Monkeypox RT-PCR kit from WHO-CO-Nepal to ensure National access to Monkeypox diagnostics.
• Standardization of Monkeypox Real Time PCR kit.

**Technical Expertise and Training**

- Continued routine work from the team of Technical Expertise and Training²
- WHO Nepal provided technical and financial support in conducting the following programs below:
  - A two day program ‘Users Training on Biomedical Equipment’ Training held from 26 - 27 July 2022 organized by National Health Training Center (NHTC). A 7th batch of 16 health care workers - 2 medical officers, 13 senior staff nurses, and 1 paramedic participated in the program. Participants were from Pokhara Academy of Health Science, Dhaulagiri Hospital, Syangja Hospital and Gorkha Hospital and Nepal APF Hospital. The training enabled the users to effectively operate and properly handle respiratory devices such as BiPAP/CPAP, HFNC, Oxygen Concentrator, Ventilator, and Oxygen Cylinder.

(Left) Opening ceremony of the “User Training on Biomedical Equipment” program and (Right) hands-on session during the program. Photo Credit: WHO Nepal/S.Rana

- A six day training on Primary Emergency Care (PEC) was held from 24 - 29 July 2022 organized by National Health Training Center (NHTC), at Dhulikhel Hospital, Kavrepalanchowk district. A total number of 7 trainers were present who trained 18 participants including doctor, nurses & health assistants. The participants were trained in providing Basic Life Support (BLS), concept of common Medical Emergencies, Primary Trauma Care, preparing for mass casualties and managing common Orthopedic Emergencies.

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² The routine works of the technical expertise and training team included technical support to the Ministry of Health and Population and its department for developing different guidelines/manuals, conducting health programs and conducting capacity building activities. In order to perform these activities, the team coordinates and discuss with relevant government authorities and partners for effective planning and conducting the various activities.
A five day program on ‘Clinical Training Skills course for Infection Prevention and Control' held from 24-28 July 2022 organized by National Health Training Center (NHTC). A total number of 16 health workers with 2 medical officers, 13 senior staff nurses, and 1 paramedic from various hospital of Kathmandu valley and provincial hospitals participated in the program.

A two day program on, ‘National Symposium on Infection Prevention and Control' held from 30-31 July 2022 organized by Nursing and Social Security Division, MoHP. There were about 150 participants from all the Provinces of the country. Participants included MoHP secretaries, Chief Specialist, Director General, Directors Divisions/Centers-Department of Health Services, Provincial Health Directorates, Secretary Ministry of Health/ Ministry of Social Development, Hospitals Directors, Nursing Directors, and representative from various level Hospitals-Provincial, Federal, Academia along with private hospitals and experts from various professional societies. Various presentations based on Health Care Associated Infection, IPC Best practice in the hospitals, Hospital Assessment reports were shared during the program. Additionally, panel discussions were also conducted to finalize the drafted IPC Guidelines.
WHO Nepal also attended a meeting at NHTC with officials from NHTC, CSD, EDCD and core writing group on 31 July 2022. The Learning Resource Package (LRP) for acute respiratory distress syndrome (ARDS) was finalized.
Operational Support and Logistics

- Continued routine work from the team of Operation Support and Logistics\(^3\).
- WHO Nepal provided logistics and operational support for the following programs:
  - One day conference arrangement for Workshop on Strengthening Event Based Surveillance System in Nepal in Kathmandu on 26 July 2022. This workshop was organized by Epidemiology and Disease Control Division and supported by WHO Nepal.
  
  ![Group photo during Workshop on Strengthening Event Based Surveillance System in Nepal.](image)
  
  Photo Credit: WHO Nepal/S. Sherpa

  o Handover of laboratory supplies (Illumina COVID Seq Assay, MiSeq Regent Kit, PhiX Control Kit, TaqPath COVID-19 real time PCR assay, QIAGEN viral RNA extraction kit and Monkeypox Real Time PCR kit) to National Public Health Laboratory on 27 July 2022.
  
  o Two-day conference arrangement for National Symposium on Infection Prevention and Control in Kathmandu on 30-31 July 2022. The event is jointly planned by Ministry of Health and Population and WHO Nepal. This event was attended by key experts from the Ministry of Health and Population, Focal persons from Central and Provincial Hospitals & Medical Academies, Provincial & other stakeholders who provided support to case management in response to COVID-19 pandemic.
  
  o Received 8 million syringes donated by WHO HQ at Patlaya Central Medical Store on 01 August 2022.

\(^3\) The routine works of the operation support and logistics team included technical support to the Management Division of the Department of Health Services for the forecasting, quantification, procurement, and commodities. The other routine activities included daily operational support to the health emergency operation centers, including fleet and travel management and the procurement of required logistics and supplies.

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Risk Communication and Community Engagement

Episode 75 of Science in 5 (Omicron Sub Variant Risk) was translated, dubbed, and published via the following links:

- Nepali: Facebook [link]; OneDrive [link]; YouTube [link]
- Maithili: Facebook [link]; OneDrive [link]; YouTube [link]
- Episode 34 of Science in 5 podcast in Nepali language was released on Soundcloud (link here). The topic of the episode was Omicron sub-variant risk. The news was shared via Facebook (link here) and Twitter (link here (English); link here (Nepali)).
- The news of Paanch Maa Bigyaan series, being broadcasted twice a week on local radio stations in all provinces of Nepal, was shared via Facebook (link here). An adaptation of the World Health Organization’s Science in 5 audio and video conversations on science, the Paanch Maa Bigyaan episodes are available in Nepali and Maithili.
- A photo story, highlighting the roles of healthcare workers and school staff during the COVID-19 vaccination campaign for children (aged above 5 and under 12 years old) was shared via WHO, Country Office for Nepal, website (link here).
- An op-ed by Dr Poonam Khetrapal Singh, WHO Regional Director for South-East Asia, written on the occasion of World Hepatitis Day, was published by Nepali Times (link here), which highlighted the COVID-19 pandemic being a substantial barrier to hepatitis testing and treatment.
- IEC materials on the following topics were shared via WHO, Country Office for Nepal, social media:
  - The importance of COVID-19 vaccines,
  - The importance of following COVID-19 preventive measures,
  - Noncommunicable Diseases and COVID-19.
- The following documents were uploaded on ReliefWeb (link here):
  - Weekly COVID-19 EPI Dashboard,
  - Focused COVID-19 and Health Media Monitoring,
- WHO and MoHP press briefings on COVID-19 are being shared via Facebook and Twitter.
- WHO Nepal is providing regular support to the Ministry of Health and Population, specifically to the Spokesperson, for the weekly National briefing. The national briefing on 27 July 2022 focused on rising cases of COVID-19, COVID-19 related deaths in Nepal, importance of public health and social measures, significance of COVID-19 vaccine and booster dose. Another key message shared was about the declaration of Monkeypox as Public Health Emergency of International Concern (PHEIC) by WHO, potential risk, symptoms of Monkeypox, transmission of the diseases and methods of prevention of monkeypox.
- Latest IEC materials on Monkeypox, RCCE interim guidance on monkeypox and the latest episodes of Science in 5 (episode 73 to 76) were shared with NHEICC officials, Spokesperson, official of health coordination division, HEOC and with the members of RCCE working group.

What are the health clusters partners doing?

- Continued routine work from the team of Partner Coordination and Donor Relation4

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4 The routine works include coordinating with all the divisions, units, centers of Ministry of Health and Population (MoHP) and Department of Health Services (DoHS), and the health partners for effective conduction of Health Cluster Coordination meeting.
• UNICEF and WHO are providing overall support for COVID-19 vaccination campaign in close coordination with health partners and donors.
• All members of the Health Cluster are supporting the COVID-19 vaccination campaign of Nepal.
• Health partners are continuing their technical, operational, and logistics support for COVID-19 responses to health-related offices and institutions throughout the country.

WHO’s STRATEGIC OBJECTIVES FOR COVID-19 RESPONSE - [link here]

RECOMMENDATION AND ADVICE FOR THE PUBLIC
- Protect yourself
- Questions and answers
- Travel advice
- EPI-WIN: tailored information for individuals, organizations and communities

USEFUL LINKS
• MoHP COVID-19 official portal is available [here].
• Nepal COVID-19 regular updates and resources are available [here].
• For COVID-19 updates from the WHO South-East Asia Region Office, please visit [here].
• For information about coronavirus disease (COVID-19) Pandemic from WHO, please visit [here].
• Please visit this site for all technical guidance from WHO.
• Online courses on COVID-19 from WHO can be found [here].
• WHO Coronavirus (COVID-19) Dashboard can be found [here].
• Visit the WHO Nepal Facebook page and webpage on COVID-19 [here].

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Furthermore, the works included the documentation and distribution of meeting minutes, health partner’s support updates in the 3Ws (Who, What, Where) and thematic mapping, updates of WHO’s support in the UNRCO 3W sheet, participate in multi-sectoral and emergency and disaster preparedness and response platforms and activities and the humanitarian country team operational meetings. Moreover, necessary support for effective coordination of Health Emergency Operation Centre (HEOC) with different stakeholders is provided.