OFFICE MEMORANDUM

Sub: Risk Assessment of Contacts of COVID-19 positive cases in Nirman Bhawan- reg

The undersigned is directed to circulate herewith a Proforma for Risk Assessment of Contacts of COVID-19 positive cases in Nirman Bhawan. The duly filled proforma may be sent at emaild- drmegha1603@gmail.com and drsunny.mohfw@gmail.com.

Encl.: As above.

(Jitender Singh)
Deputy Director (Admn.)

To,

1. Dr. P. K. Sen, Addl. DG, Dte.GHS.
2. Dr. Megha Pravin Khobragade, ADG, Dte.GHS.
3. Dr. Sunny Swarnkar, Specialist Grade-III, Dte.GHS.
4. All Officers/Sections/Cells, in Dte.GHS with the request to bring the content of the O.M to all staff as much as possible.

Copy To,

1. Sr. PPS to DGHS.
2. PS to DDG(P/A), Dte.GHS.
3. PS to Director (HQ), Dte.GHS.
4. The Under Secretary (Admn.)/ MoHFW with the request to circulate the O.M to all Ministries/Deptt. stationed at Nirman Bhawan.
5. DD (GA) for uploading in website.