Hospital Evaluation, Admission, and Discharge of Obstetric Patients with Potential COVID-19

Home or Clinical Office Who are:
- >20 weeks
- Fever > 38°C
- URI symptoms/Respiratory distress
- Gastrointestinal Symptoms

Patient is to be evaluated in Triage T72 or LD 15

History and Physical performed by Care Team

If any questions, concerns, and comments do not hesitate to call at anytime (252-916-2325)

Thank you,
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Medical Director, Obstetrics

Admit to:
- Labor and Delivery (LD 15) (mild to moderate)
- MICU (severe)

Antipyretic treatment
Supp. O2/Pulse Ox

Labor and Delivery of COVID or PUI Patient

Patient Requiring C-section

1. Obstetrical Nurses are to don required PPE for COVID/PUI c-section (N95, face shield, cap, gown, and gloves) prior to transporting patient.
2. Obstetrical Physicians/Scrub Tech are to enter OR suite via east OR doors, don required PPE for COVID/PUI C-section (N95, face shield, cap), then enter OR1 or OR2 via appropriate air lock, surgical gown and gloves will be donned once in OR.
3. Pediatric Physicians/Nurses/RT/CrNA/Ologist are to enter OR suite via east OR doors, don required PPE for COVID/PUI C-section (N95, face shield, cap, gown, and gloves), then enter OR1 or OR2 via appropriate air lock.
4. Once surgical Team is in the OR, Patient is to be transported to OR1 or OR2 via west OR doors entrance with std surgical mask on patient by Obstetrical Nurses.
5. Patient is to be moved to operating table and prepared for administration of anesthesia (spinal or GETA).
6. C-section executed in standard fashion.
7. Neonate handed off to Pediatrics, once pediatrics have evaluated neonate, they leave OR into doffing airlock, doff all PPE safely, then exit doffing airlock via west OR doors.
8. Once pediatrics have left procedure is complete, then Obstetrical Physicians remove surgical gown and gloves, leaves OR into doffing airlock, doff all PPE safely, then exit doffing airlock via west OR doors.
9. When patient is ready to leave OR, patient’s bed is moved from doffing airlock to OR, Patient is moved onto patient bed, patient is taken into doffing airlock, standard surgical mask is placed on patient.
10. Separate unit Obstetrical Nurse enters doffing airlock via west OR doors with standard droplet PPE (standard surgical mask, face shield, cap, gown, and gloves) and transports patient back to her room for further recovery.

Patient Candidate for Vaginal Delivery

1. Patient to be labored and delivered in patient’s labor and delivery room (LD15/Triage 72/OR1 or OR2).
2. Obstetrical Providers, Obstetrical Nurses, Pediatric provider/Nurses are don required droplet PPE (standard surgical mask, face shield, cap, gown, and gloves) prior to entering room.
3. If there is a high likelihood of neonate requiring intubation in delivery room, then Pediatric providers/Nurses, Obstetrical Providers, Obstetrical Nurses are to don PPE for COVID/PUI patient (N95, face shield cap, gown, and gloves) prior to entering room.
4. After neonate is delivered and moved from delivery room, patient is to recover in her room or taken back to her original labor room if vaginal delivery occurred in OR1/OR2.
5. Decision to delivery in ORs should be made using standard obstetrical indications (delivery less than 34 weeks, twins, etc.)

Non-PUI or COVID Negative

Standard Obstetrical Care

Definitions
COVID or PUI: Patient who has tested positive or COVID testing is in progress or is being considered for COVID testing.
Non-PUI or COVID Negative: Patient who is not being considered for COVID testing or is COVID Negative after testing.

Adopted from:
- NCDHHS (March 12, 2020) Interim Guidance for Use of Personal Protective Equipment (PPE) While Caring for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19)
- CDC (March 10, 2020) Interim Infection Prevention and Control Recommendations for Patients with Suspected or Confirmed Coronavirus Disease 2019 (COVID-19) in Healthcare Settings