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During  COVID-19
For Gynaecologists

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SURAKSHA MODULE – 2

BEST PRACTICES FOR PREGNANT WOMEN DURING COVID 19

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Introduction

- COVID 19 is an unique situation where risk and benefit of every health care needs to be evaluated and modified to decrease the risk without affecting benefits.
- Pregnancy is also an unique condition which is time bound as far as need for health care is required, deals with two healthy lives, and is state of altered physiology like hyper- coaguable state, immunosuppression, vertical transmission making pregnant mother more vulnerable for complications of COVID infection even though risk of catching infection is not increased as compared to non pregnant state.

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Aim of this article is to summarize practices to be followed by maternity care providers to

- Minimize risk of catching COVID infection by otherwise healthy pregnant mother attending health facility for antenatal care
- Minimize risk of catching infection by health care providers
- To avoid risk of transmission because of travel involved in routine visits
- To be able to identify at risk mothers for COVID infection and trying to prevent complications by providing care by experts to them
- To achieve aim of antenatal care i.e. healthy baby and mother despite of restricted resources, less number of visits and ultrasound examination

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Principles of changed face of antenatal care

- Reduce in person visits
- Combine examination, vaccination, investigations and if required ultrasound in same visits
- Optimize use of ultrasound to avoid risk to both, patient and care giver
- Use telemedicine for review of reports, prescribing for minor elements
- Train patient for home monitoring of blood pressure, weight and fetal movements and identifying danger signals
- Use appropriate precautions during in person visit, ultrasound and any other procedure

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Plan for in person visits

- We used to insist that woman should report to doctor as soon as she misses the period. Now keeping the principle of social distancing in mind, we will encourage them to confirm pregnancy by urine pregnancy test at home and then consult the doctor for necessary investigations and medicines if possible on phone unless she desires MTP.
- Reports of investigations can be reviewed via telemedicine. To rule out ectopic pregnancy careful history needs to be taken. In high risk patients, one visit in first trimester is advised. Need of first trimester scan should be optimised and may be done around **12 to 13** weeks along with double marker.

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Plan for in person visits:

- Asymptomatic patient can visit the health care facility around **18- 20** weeks, where systemic, obstetric examination, tetanus toxoid injection, investigations if any and anomaly scan can be done in one visit along with prescribing.
- Woman should be educated for home monitoring of blood pressure, weight and fetal movements. She should be made aware of danger signals for which she may need to consult doctor.
- Every visit should also be by appointment of all concerned wherever possible.

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Plan for in person visits:

- If home monitoring is satisfactory for both, patient and doctor, then next visit is around **28** weeks to check interval growth of fetus clinically, vaccination and any change in treatment like increasing dose of Iron.
- If course of pregnancy is uneventful, then next visit is around **36** weeks for risk assessment of mother and fetus and discussing preliminary delivery plan, need for elective section.
- Final visit will be around **39** weeks for deciding delivery plan, testing for Corona, procedure to be followed for admission.

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Plan for in person visits:

- While staying at home, pregnant woman should avoid unnecessary travel, should wash hands frequently, avoid touching face, nose, eyes with unwashed hands, cover mouth and nose with cloth while coughing/ sneezing, avoid close contact with other members in family or outsiders.
- Proactive efforts should be done during phone calls to relieve mental stress if any because of unique situation
- In case she develops any untoward symptom like pain in abdomen, bleeding or leaking per vaginum, raised blood pressure, decreased fetal movements, emergency visit should be arranged.

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Some Tips About Telemedicine

Telemedicine has been permitted by the Medical Council of India at the present time . Below are some pointers towards safe telemedicine practice. ·

- The same ethical and professional standards should be practiced as per usual practice.
- Various forms of communication can be used as per the choice of both parties. This may be in the form of video (specialized telemedicine platforms or general platforms such as WhatsApp, Zoom, FacebookLive, Skype, etc.), audio (telephone or any other voice-over-Internet-protocol) or written communication (email, messages on various applications). · First consultations should preferably be via a video format to build rapport.

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Some Tips About Telemedicine

- Emergency consultations should be limited to directing the patient or care giver to the appropriate site for physical care and advice about first aid until reaching such a site in case of respiratory symptoms.
- Interventions by the doctor could be health education, counselling or prescription of medications.
- Prescriptions should be provided in a standard format.
- Medications are grouped as per the mode of consultation, feasibility and safety of telemedicine. List O includes drugs which are available over the counter such as paracetamol, oral rehydration solutions, etc.

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Some Tips About Telemedicine

- They may be advised by any mode of consultation. List A includes drugs that can be prescribed only after video consultation such as eye drops for conjunctivitis. List B comprises of drugs that are prescribed for the same condition as add-ons (Eg: ondansetron for severe nausea in pregnancy which is not relieved by first line agents like doxylamine). Certain medications (psychotropic agents, narcotics and schedule X drugs) cannot be prescribed in telemedicine consultations. ·
- Consent is implied when the patient initiates a consultation with the doctor. However, if the doctor has initiated the consultation (on the request of the patient's caregiver, for example), an explicit consent should be taken. This can be done by recording the patient saying a simple statement such as “I consent to avail consultation via telemedicine.” · At present, doctors do not need any special training to do telemedicine
- Documentation and maintenance of records may be in physical or electronic form about all consultations for particular patient
- Telemedicine may be a chargeable service.

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Care to be taken during in person visit-

- Screening of patients on phone before appointment or at entry of clinic using checklist and thermal check for risk of Corona infection
- Suspect cases to be directed to Corona care clinics and authorities to be informed accordingly
- If appointment is taken, follow timing and avoid unnecessary waiting in clinic
- Only one attendant should accompany if she is not able to come alone
- Foot gears,(chappals and shoes) to be removed outside clinic, arrangements to be made to keep them individually and avoid mixing
- Hand hygiene with help of hand sanitizer kept in reception area for patient
- Social distancing and wearing of mask is must for patient and attendant

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Care to be taken during in person visit-

- Doctors and paramedical staff should wear appropriate personal protection equipment i.e. Work uniform, disposable surgical cap and mask, disposable gloves (level I protection).
- The person at entry of clinic doing COVID screening should use level II protection, i.e. disposable surgical cap, medical protective mask (N95), work uniform plus disposable medical protective uniform, latex gloves, goggles
- After dealing with every patient washing of hands or cleaning with sanitizer should be done
- Appropriate care to be taken while examination
- Routine chemo prophylaxis is not advocated for care givers not dealing with suspect or positive cases

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Care to be taken in consulting room-

- Avoid air conditioning.
- An exhaust fan should be switched on or the window should be opened.
- The fan may be a ceiling fan or a standing/table fan blowing air in a direction away from the doctor. ·
- The consulting room should be kept free from clutter and have the minimum amount of furniture necessary.
- The furniture should be hard surfaced to facilitate cleaning

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Care to be taken in consulting room-

- The patient examination table can have disposable covers where possible. ·
- The number of fomites (mobile phones, electronic devices, pens, measuring tapes, stethoscopes and BP apparatus) should be kept to a minimum and frequently sanitized.
- Minimize handling paper, files and reports that the patient brings. It can be seen with the patient holding them or by photographs.
- The consulting room should be cleaned regularly.
- At the end of the clinic, the examination table should be disinfected. The room may be fumigated at the end of the day.

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Care to be taken during ultrasound examination

Ultrasound examination rooms are usually small, less ventilated, air conditioned. In addition there are multiple surfaces where virus can remain for 4 to 5 days. Adequate distancing is not possible for sonologist. All these facts make ultrasound examination potential source of transmission unless at most precaution is taken. Doctor and patient both are at risk.

Following points to be noted along with reducing number of examinations:

- Scheduled appointment to avoid waiting time and exposure.
- After each examination, the highly touched surfaces of the ultrasound machine should be thoroughly cleaned.
- Replace the fabric cover chair with a hard surface chair so that cleaning becomes easy. If possible replace all washable linen, such as towels, pillow covers, and sheets with disposable

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Care to be taken during ultrasound examination

- Clean ultrasound transducers and cables after every scan.
- Make use of disinfectant to wipe the patient's bed or couch before replacing it with the disposable paper cover.
- At the end of the day dispose of soiled linen in an appropriate container by using pairs of gloves.
- Clean the room and the equipment with disinfectant and wash hands for 20 seconds thereafter.
- The factors affecting the success of this changed strategy are, understanding of responsibility by patients and relatives at every stage right from giving correct answers for questions in checklist.

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Care to be taken during ultrasound examination

- There is risk that patient may hide the information about contact, respiratory symptoms in fear of referral to COVID OPD. Effectiveness of communication while using telemedicine from both sides, up to date information about changing policies to reach to every level of maternity care provider from obstetricians to AYUSH practitioners to midwives, availability of resources to abide by given guidelines during in person visits and ultrasound examination.
- This situation is also going to increase economical, physical, psychological burden on health care facilities and patients

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Care to be taken during ultrasound examination

- Reduction in number of visits and ultrasound examinations seems like arms of clock are moving anti clock wise.
- Before eighties, there was reluctance in society for early registration and regular antenatal visits.
- Ultrasound was not available everywhere, so clinical diagnosis was carrying importance. The only difference was patient were having strong faith on doctor. We need to be more careful.

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Summary

- There are three things we must focus on:
- Patient education for- Home monitoring of blood pressure, weight, fetal movements, awareness of risk factors requiring urgent consultation, timely compliance to doctor's advise ,Simple exercises to keep them active while staying at home so that risk of thromboembolism is reduced
- Ensuring skill of caregivers and faith on their own clinical acumen so that dependability on ultrasound will decrease, mainly for fetal growth, amount of amniotic fluid, mal presentation, incomplete/ complete abortion.
- Improving doctor patient relationship and rebuilding faith on doctor's diagnosis along with support of law considering this special situation. One detrimental thing to this relationship is reassuring touch of doctor will not be so easy while following norms of social distancing.

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