Guidance for Management of Pregnant Women in COVID-19 Pandemic
<table>
<thead>
<tr>
<th>S.No.</th>
<th>Contents</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Effect of COVID-19 on Pregnancy</td>
</tr>
<tr>
<td>2</td>
<td>Transmission of COVID-19</td>
</tr>
<tr>
<td>3</td>
<td>Instructions for health care workers</td>
</tr>
<tr>
<td>4</td>
<td>Management of COVID-19 positive pregnant women</td>
</tr>
<tr>
<td>5</td>
<td>Management of COVID-19 positive pregnant women with labor pains</td>
</tr>
<tr>
<td>6</td>
<td>COVID-19 suspect PW: home quarantined/ from containment zone / Cluster, with labor pains and no symptoms</td>
</tr>
<tr>
<td>7</td>
<td>Symptoms of COVID-19 are apparent/ lab test not done/ test report awaited</td>
</tr>
<tr>
<td>8</td>
<td>General Precautions to be followed during and after delivery</td>
</tr>
<tr>
<td>9</td>
<td>Points to Remember</td>
</tr>
</tbody>
</table>
Effect of COVID-19 on Pregnancy

- Pregnant women do not appear more likely to contract the infection than the general population.
- Reported cases of COVID-19 pneumonia in pregnancy are milder and with good recovery.
- Pregnant women may elicit severe symptoms as pregnancy itself alters the body’s immune system and response to viral infection.
- Pregnant women with heart disease are at highest risk (congenital or acquired).
- Increased risk of perinatal anxiety and depression, as well as domestic violence.
Transmission of COVID-19

• Vertical Transmission is possible as per emerging evidence.

• At present, there are no recorded cases of:
  • Vaginal secretions being tested positive for COVID-19
  • Breast milk being tested positive for COVID-19

Effect on fetus

• No data suggesting increased risk of pregnancy loss or teratogenicity

• COVID-19 infection is currently not an indication for Medical Termination of Pregnancy
Instructions for Health Care Workers

• Seating arrangement to be made such that at least **1-meter distance**

• In health facilities, **entry and exit door to be made separate** for the beneficiaries

• The place should be **disinfected with 1% sodium hypochlorite solution** after providing the services

• All health care workers including ASHA should **wear masks at all time**

• **Safety measures** like- social distancing, hand washing, respiratory hygiene need to be followed strictly

• Waste disposal should be as per the **BMW management guidelines**
Possible scenario while managing COVID-19 Pregnant Women in a health facility

Scenarios:

• Management of COVID-19 positive pregnant women
• Management of COVID-19 positive pregnant women with labor pains
• COVID-19 suspect PW who were home quarantined/from containment zone/Cluster has come with labor pains and does not have any symptom
• Symptoms of COVID-19 are apparent/lab test not done/test report awaited
<table>
<thead>
<tr>
<th><strong>Admission</strong></th>
<th>In DH (DCHC) / Medical College COVID ward</th>
</tr>
</thead>
</table>
| **Monitoring**| • General check-up  
• FHS  
• Sonography  
• Necessary laboratory tests |
| **Treatment** | Symptomatic treatment. Refer to DCH if symptoms worsen |
| **Safety** | PW should be provided with triple layer mask, soap and sanitizer during her stay in the isolation ward |
| **Discharge** | PW can be discharged as per the revised discharge protocol of COVID 19 |
Management of COVID 19 Positive Pregnant Women with Labor Pains

Delivery

- **Normal**
  - Use septic labor room of DCHC/MC
  - If septic labor room is not available, separate room should be developed as septic labor room

- **Caesarean**
  - Use 1 maternity OT out of the 2 available OTs
  - If only 1 maternity OT, general OT should be used for COVID positive women

**IPC measures**
- Delivery should be conducted wearing the PPE kit
- After delivery labor room/OT should be disinfected as per the protocol

**After delivery**
- Woman should remain admitted in DCHC/ dedicated COVID ward and postnatal care should be given to mother and newborn as per the protocols.

**Refer to DCH**
- If the COVID-19 symptoms worsens or in case of obstetric complications
COVID 19 suspect PW: home quarantined/from containment zone/cluster/migrant labour, with labor pains and no symptoms

Collect sample and send for testing. **Woman should be kept in hospital till test results come and later management to be decided depending on test report**

**Delivery**

- **Normal**
  - Use septic labor room of DCHC/ MC
  - If septic labor room is not available, separate room should be developed as septic labor room

- **Caesarean**
  - Use 1 maternity OT out of the 2 available OTs
  - If only 1 maternity OT, general OT should be used for COVID positive women

**IPC measures**

- **Delivery should be conducted wearing the PPE kit**
- **After delivery labor room/OT should be disinfected as per the protocol**

**After delivery**

- **Woman should remain admitted in DCHC/ dedicated COVID ward and postnatal care should be given to mother and newborn as per the protocols.**

**Refer to DCH**

- **If the COVID-19 symptoms worsens or in case of obstetric complications**
Symptoms of COVID 19 are apparent/ lab test not done/ test report awaited

**Collect sample and send for testing. Consider the woman as positive until the result**

**Delivery**

**Normal**
- Use septic labor room of DCHC/ MC

**Caesarean**
- Use OT identified for COVID patients

**IPC measures**
- Delivery should be conducted wearing the PPE kit
- After delivery labor room/OT should be disinfected as per the protocol

**After delivery**
- If the test result comes positive woman should remain admitted in DCHC/ dedicated COVID ward and postnatal care should be given to mother and newborn as per the protocols.

**Refer to DCH**
- If the COVID-19 symptoms worsens or in case of obstetric complications
General Precautions to be followed during and after delivery

1. **PW belonging to any of the above 4 conditions, should be given an identification tag.**

2. **PW should be provided with masks. After delivery, before starting breastfeed, woman should wash her hands and feed the baby wearing the triple layer medical mask unless she has severe symptoms.**

3. **Staff conducting the delivery should be provided with PPE kit.**

4. **NBCC should be established in septic labor room and OT, to manage if the newborn develops any complication.**

5. **After the use, all equipment – wheelchair, labor table, warmer etc. should be disinfected with 1% hypochlorite solution as per the protocol.**
General Precautions to be followed during and after delivery

- **BMW should be disposed separately as per the BMW management guidelines for COVID**

- **If the woman or newborn is referred, then disinfection of ambulance should be done as per the protocol**

- **Zero dose of vaccines to be given to the baby. Breast feeding to be done using mask and following the handwashing practices**

- **Use minimum staff for delivery of these cases, because if required the staff will be sent for quarantine if indicated (as per protocol)**

- **Pregnant staff member should not be given duty of delivery of positive/suspect COVID pregnant women**
General Precautions to be followed during and after delivery

1. Sufficient number of N-95 masks, gloves, sanitizer, mask and PPE kits should be made available in the maternity wing and stock should be replenished regularly.

2. CS and facility in-charges are responsible to ensure availability of PPE kits along with other essential logistics.

3. At the delivery points, Matron/ Sister in-charges are responsible to indent the necessary supplies on time.

4. Obstetric complications should be managed in the DH itself. Staff should deter from unnecessary referrals, as it will increase the chances of infection.
Points to Remember

- Aim is to keep oxygen saturation >94%, titrating oxygen therapy accordingly

- There is currently no evidence to favor one mode of birth over another, unless the woman’s respiratory condition demands urgent delivery

- To minimize the need for general anesthesia if urgent delivery is needed, epidural analgesia may be recommended- no evidence on contraindication

- Normal delivery, caesarean and other OBS/GYN procedure should be done after wearing proper PPE