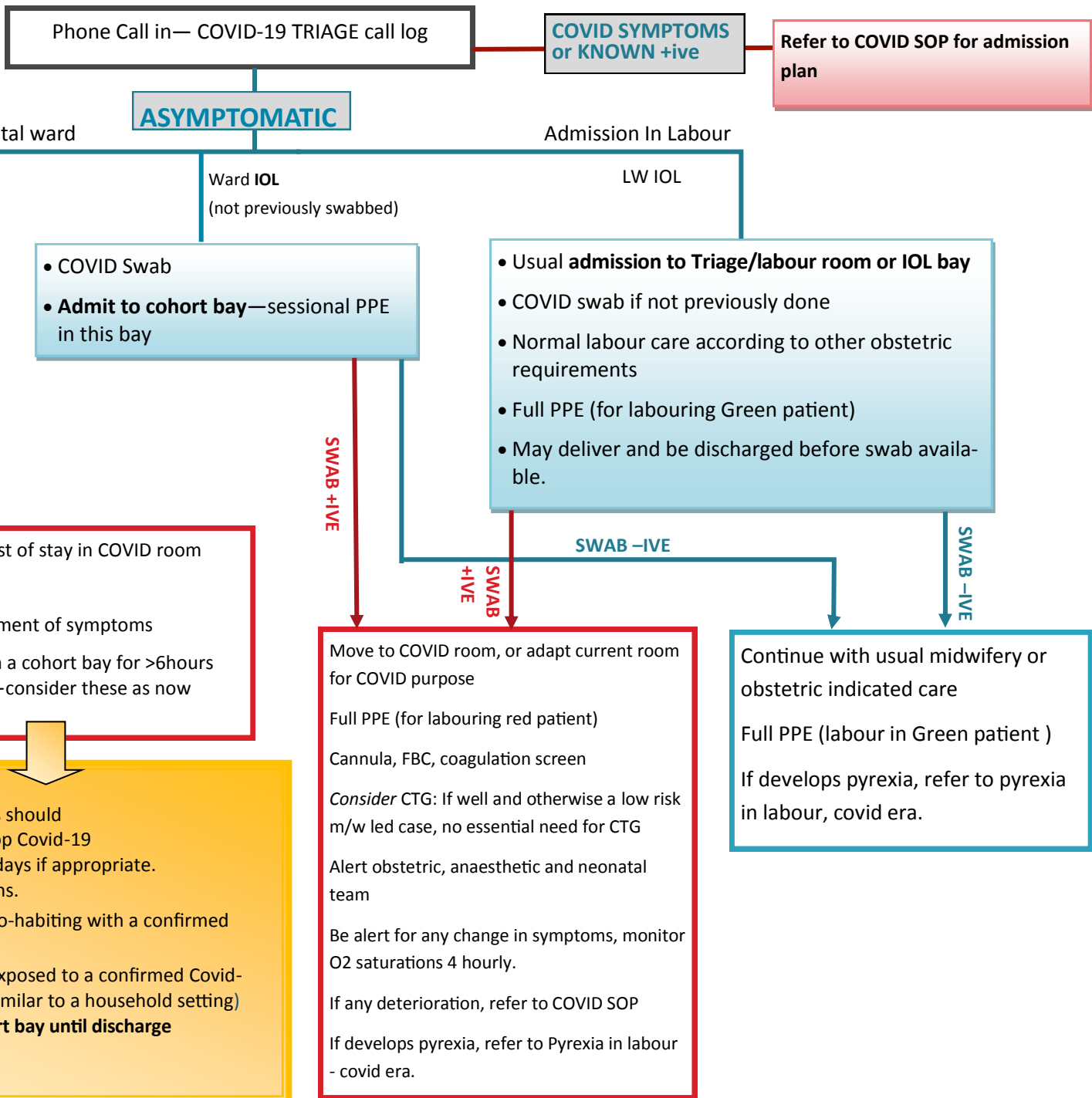


# Antenatal, Induction and Labour Admissions in COVID



**AMBER RISK**  
 Patients who have been exposed to positive Covid-19 patients should be cohorted (and monitored) for 14 days to see if they develop Covid-19 symptoms. Patients can be discharged home within these 14 days if appropriate. Patients should be considered amber in the following situations.

- Patients coming in from the community who have been co-habiting with a confirmed covid +ve patient *\*suggest we keep as red\**
- In patients in Green areas who are known to have been exposed to a confirmed Covid-19 patient while on the ward i.e same bay (an exposure similar to a household setting) *\*suggest we cohort until discharge\* we keep in the Cohort bay until discharge*

## Post-natal Pathway in COVID

COVID STATUS	PLAN FOR PN Inpatient Stay	Plan for PN community follow up
Symptomatic, Swab +ive, Unwell	Remain in COVID room on CDS until discharge	Dependant on date of discharge plan virtual/ home visit with appropriate PPE
Asymptomatic Swab +ive RED patient	Remain in COVID / LW room until discharge or transfer to : RSCH—PN side room PRH— Bay 7 Aim for early discharge	Dependant on date of discharge plan virtual/ home visit with appropriate PPE
Asymptomatic Swab –ive Exposed to a COVID +ive patient on the ward	Return to cohort until swab results available or d/c home RSCH / RACH—Amber bay, PRH—Bay 8	Visits will be dependant on swab results and date of discharge.
Asymptomatic Swab –ive Green Patient	Return to normal PN bay (GREEN) according to obstetric / neonatal requirement Plan for 6 hr discharge where possible	Usual postnatal home visit plan

## Elective Caesarean Pathway in COVID Ver 1.

COVID STATUS	ADMISSION / THEATRE Logistic	Operative PPE guidance	Recovery / Postnatal
Symptomatic Swab +ive	Delay where possible  Follow COVID pathway for admission to department  Or admit if unwell	Refer to Obstetric theatre Pathway  Level 3 PPE	Remain in COVID room until discharge ON CDS.  P/N visits dependant on date of discharge
Symptomatic Swab –ive	Delay surgery until well where possible  Can re-swab pre surgery  If unable to delay, manage as per +ive case (below)	Refer to Obstetric theatre Pathway  Level 3 PPE if remains symptomatic at time of surgery	P/N visits dependant on date of discharge
Asymptomatic Swab +ive	Delay where possible.  Admit to COVID room—for duration of stay  PRH: level 1. theatre  RSCH: - do at end of other electives	Refer to Obstetric theatre Pathway  Level 3 PPE	RSCH—Red Bay  PRH—Bay 7
Asymptomatic Swab –ive	Usual admission  PRH: CDS theatre  RSCH: Level 13, do first	Refer to Obstetric theatre pathway  Airway AGP—level 3 PPE  If no airway AGP or extensive diathermy expected —level 2 PPE  If expecting higher diathermy use (eg. Predicted complicated surgery) - level 3 PPE	Post natal ward green bays  Usual postnatal visiting pathway

\*Need clarification from ID / micro—what if symptoms persist—should we re-swab? And will this affect neonatal plans etc.