

Women's and Children's Care

Management of Labour, Birth and Postpartum Care for Patient Under Investigation (PUI) or With Confirmed COVID-19 Infection

Patient assessed in Triage/ED and determined to be PUI or patient transfer with confirmed COVID-19 infection:

1. Initiate **Droplet/Contact** precautions in private/isolation room. Ensure proper signage
2. BC RN performs hand hygiene and dons PPE for droplet/contact
3. Triage RN transfers patient to designated COVID-19 room and OBCU RN receives handover from Triage RN.
4. Confirm COVID-19 Order set initiated and swabs completed as ordered
5. Limit visitors – 1 support person (**must be masked at all times**)
6. **Ensure notification: to the appropriate OB/GP/MW team. Notify NICU CN, OB anesthesia, and OB RT.**
7. Follow [Patient Management Flow & Communication Flowmap](#) (OBCU Website – COVID)
8. Monitor patient for respiratory deterioration – vital signs as ordered
9. Continuous fetal monitoring where ordered (fetal heart rate changes will occur prior to maternal signs and O2 Sat monitoring)

