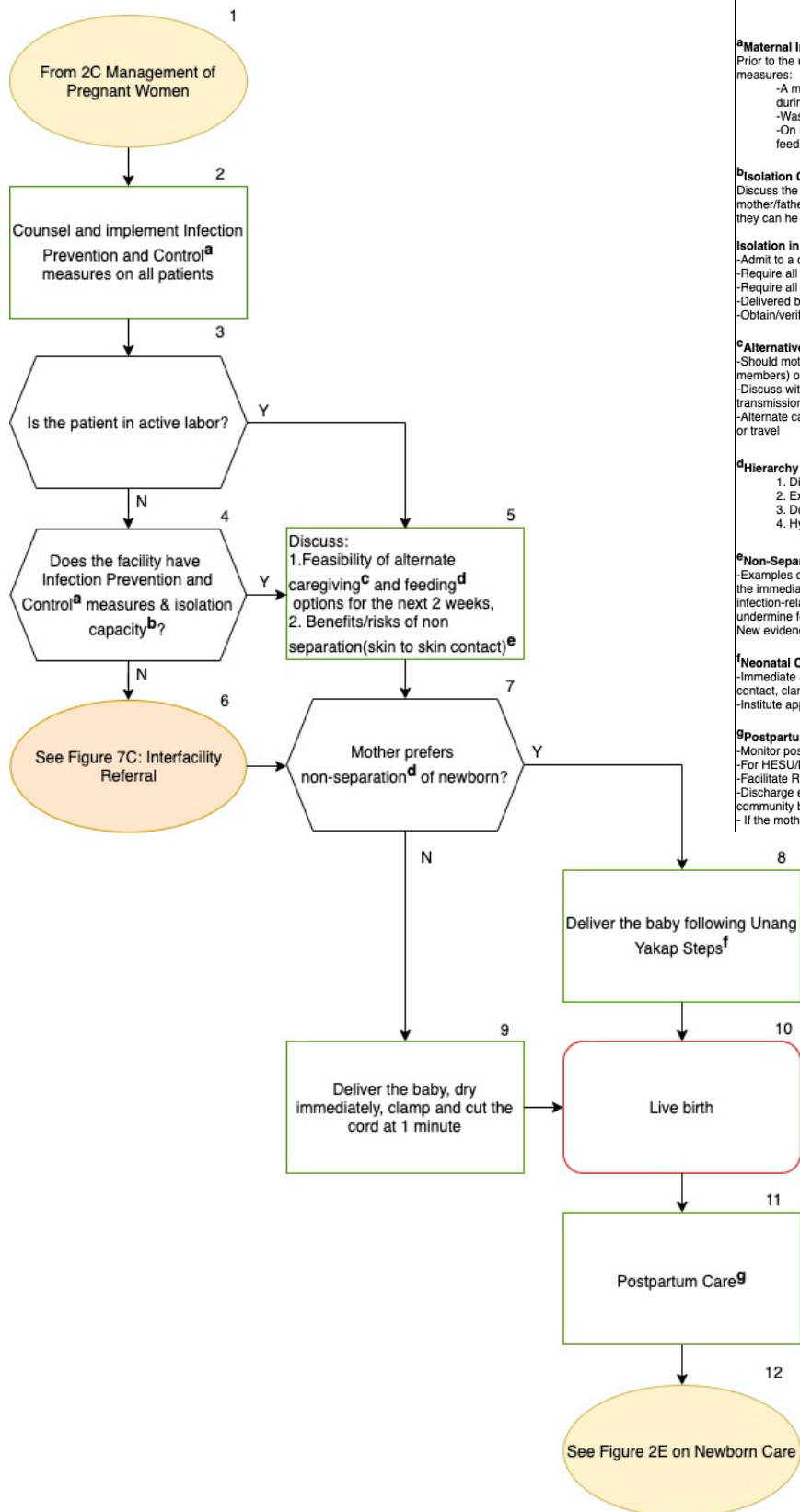


FIGURE 2D. MANAGEMENT OF COVID-19 SUSPECTS OR CASES IN LABOR

NOVEMBER 7, 2020



FOOTNOTES

^aMaternal Infection Prevention and Control (IPC)

Prior to the use of this algorithm, it is expected that the mother is already aware of and following maternal IPC measures:

- A minimum of a face mask must be worn by or provided to the mother during delivery, postpartum, and during care of the baby
- Wash hands using soap and water before and after handling baby
- On nipple care, as long as IPC measures above are observed washing/cleaning the nipple before/after feeding is discouraged

^bIsolation Capacity

Discuss the available options for isolating the mother-newborn dyads, whether together or separated, with the mother/father. Are enough isolation rooms available? Is there a dedicated unit for separated newborns where they can be maintained >1m apart?

Isolation in Imminent Delivery

- Admit to a designated isolation area
- Require all personnel in attendance to wear the appropriate PPE
- Require all transport personnel to wear the appropriate PPE to be removed once patient has been transferred
- Delivered by NSD
- Obtain/verify if the naso-opharyngeal swab specimens were collected

^cAlternative Caregivers

-Should mother prefer separation, alternate caregivers include all possible contacts (e.g. health workers, family members) of the baby during the time of separation from the mother
-Discuss with the family who the available alternate caregiver(s) will be, what their COVID status are, what the transmission risks are, how much PPEs are needed, and how available are these PPEs
-Alternate caregivers must also undergo assessment regarding symptoms, contact, and exposure via residence or travel

^dHierarchy of feeding options

1. Direct breastfeeding with IPC
2. Expressed breastmilk with IPC
3. Donor breastmilk, preferably pasteurized
4. Hygienically and properly prepared breastmilk substitutes, only after all above have been exhausted

^eNon-Separation

-Examples of benefits of non-separation Non-separation keeps babies warm, prevents exposure to diseases in the immediate environment, and helps establish breastfeeding. Delays in breastfeeding increases risk for infection-related deaths among newborns, and result in breastfeeding difficulties. Breastfeeding problems can undermine food security of a household with limited resources, as funds are funneled to prioritize infant formula. New evidence suggests that COVID-19 antibodies are found in the breastmilk of infected mothers.

^fNeonatal Care

- Immediate and thorough drying of the newborn, early skin-to-skin contact, clamp/cut cord between 1-3 mins after delivery
- Institute appropriate neonatal resuscitation measures as necessary

^gPostpartum Care

- Monitor postpartum patient in the same isolation area by the same delivery team
- For HESU/MESU/CESU to coordinate with LGU for contact tracing
- Facilitate RT-PCR Testing (See Figure 1C, 2E)
- Discharge early once stable, if mild case coordinate with HESU/MESU/CESU to coordinate with LGU for community based isolation and monitoring
- If the mother prefers non separation, the mother and the baby should always stay together