D. Departments like cardiology, Gynecology & Obstetrics, radiotherapy, and dialysis units should follow the same protocol for staff, sanitation, disinfection and protection.

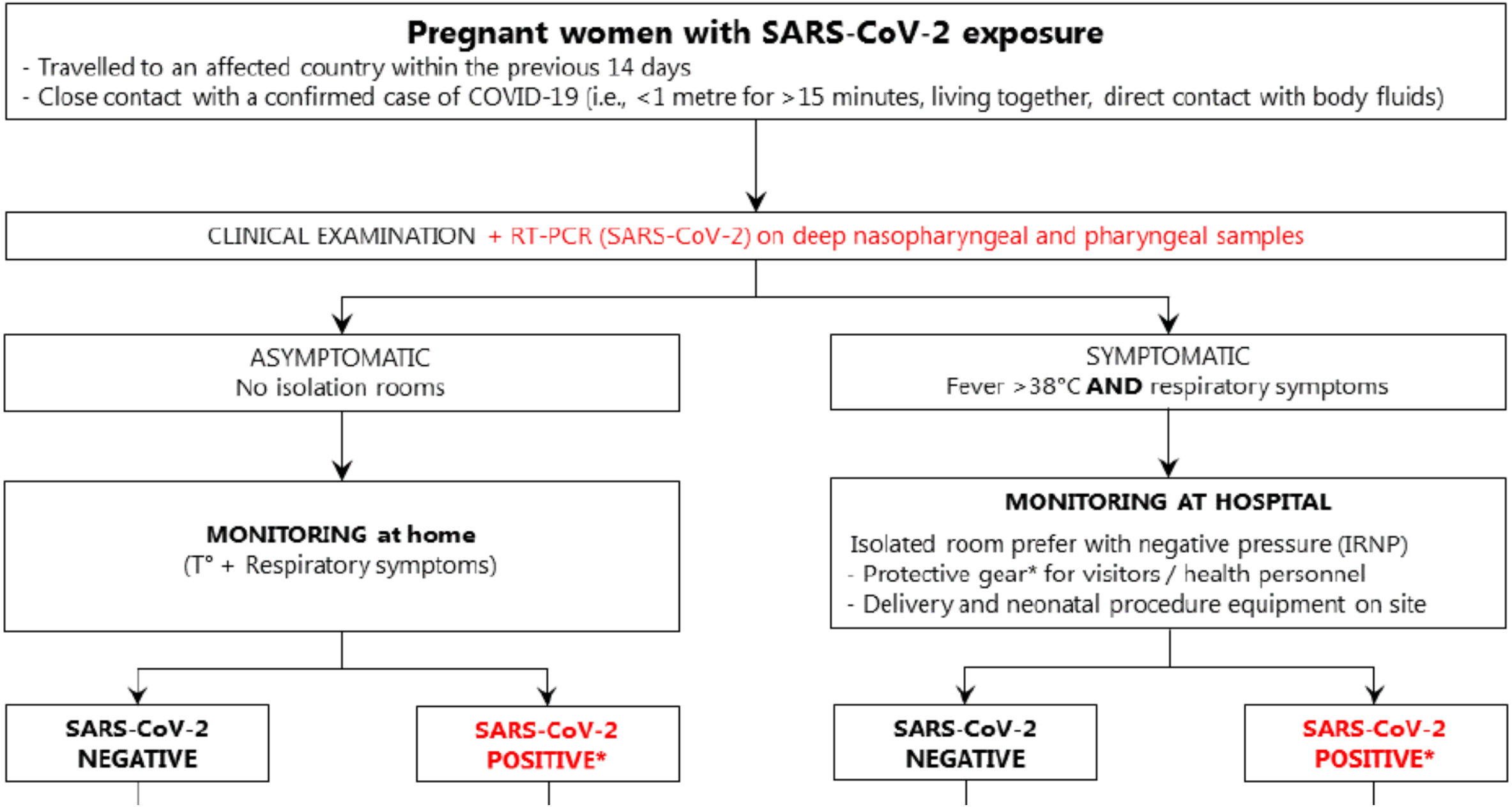
- Cardiology department
  1. Should have dedicated and fully equipped ward with separate entry/exit.
  2. Dedicated CATH lab for COVID positive patients to be earmarked.
- Gynaecology & obstetrics
  1. Should have dedicated and fully equipped ward with separate entry/exit.
  2. Dedicated COVID positive OT and labour room to be earmarked.

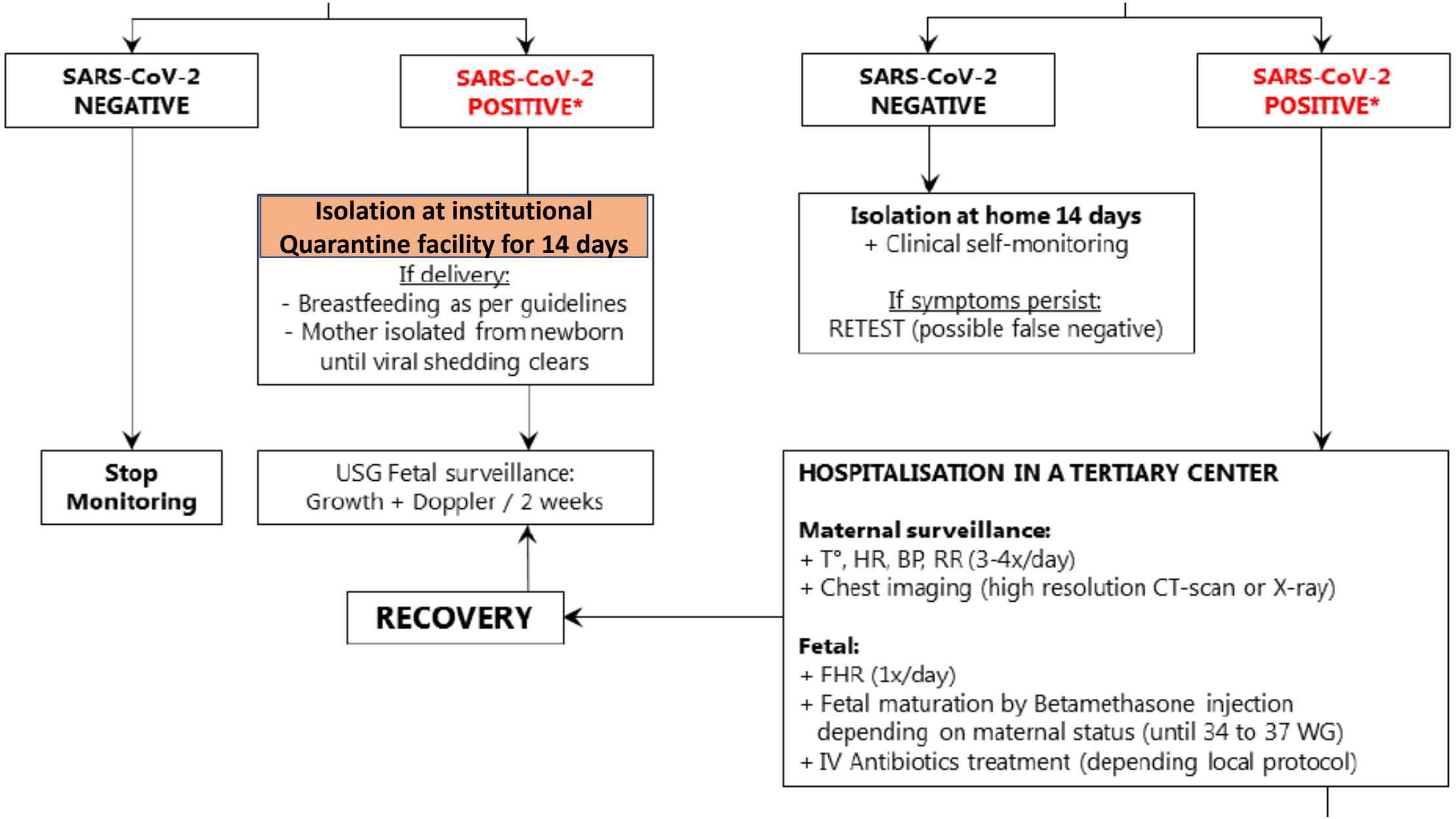
- Suspected pregnant COVID women should be sent to TRIAGE area or suspected isolation ward.
- Nasal swab for COVID-19
- Connect pulse oximeter. Take SPO2 hourly; oxygen saturation more than 94%.
- All this should be done in complete precaution (PPE and N95 mask)
- If not in labour, keep the patient there
- If in labour, try to perform vaginal delivery, otherwise LSCS in dedicated OT with all precaution

- Cut short second stage of labour in vaginal delivery, if patient is exhausted or hypoxic.
- Early cord clamping can be done
- LSCS to be done preferably in spinal or epidural anaesthesia over GA (Aerosol contamination can occur).
- Post delivery patient should be sent to TRIAGE or suspected isolation ward.
- Breast feeding is debatable, prefer expressed breast milk, otherwise mother can feed with full protection.

Transmission

- With regard to vertical transmission (transmission from mother to baby antenatally or intrapartum), emerging evidence now suggests that vertical transmission is probable, although the proportion of pregnancies affected and the significance to the neonate has yet to be determined.
- At present, there are no recorded cases of vaginal secretions being tested positive for COVID-19.
- At present, there are no recorded cases of breast milk being tested positive for COVID-19.


Pregnant women with SARS-CoV-2 exposure
- Travelled to an affected country within the previous 14 days
- Close contact with a confirmed case of COVID-19 (i.e., <1 metre for >15 minutes, living together, direct contact with body fluids)
CLINICAL EXAMINATION + RT-PCR (SARS-CoV-2) on deep nasopharyngeal and pharyngeal samples
ASYMPTOMATIC
No isolation rooms
SYMPTOMATIC
Fever >38°C AND respiratory symptoms
MONITORING at home
(T° + Respiratory symptoms)
MONITORING AT HOSPITAL
Isolated room prefer with negative pressure (IRNP)
- Protective gear* for visitors / health personnel
- Delivery and neonatal procedure equipment on site
SARS-CoV-2 NEGATIVE
SARS-CoV-2 POSITIVE*
SARS-CoV-2 NEGATIVE
SARS-CoV-2 POSITIVE*


SARS-CoV-2 NEGATIVE
SARS-CoV-2 POSITIVE*
SARS-CoV-2 NEGATIVE
SARS-CoV-2 POSITIVE*
Isolation at institutional Quarantine facility for 14 days
If delivery:
- Breastfeeding as per guidelines
- Mother isolated from newborn until viral shedding clears
Isolation at home 14 days
+ Clinical self-monitoring
If symptoms persist:
RETEST (possible false negative)
Stop Monitoring
USG Fetal surveillance:
Growth + Doppler / 2 weeks
HOSPITALISATION IN A TERTIARY CENTER
Maternal surveillance:
+ T°, HR, BP, RR (3-4x/day)
+ Chest imaging (high resolution CT-scan or X-ray)
Fetal:
+ FHR (1x/day)
+ Fetal maturation by Betamethasone injection depending on maternal status (until 34 to 37 WG)
+ IV Antibiotics treatment (depending local protocol)
RECOVERY

INTENSIVE CARE UNIT ADMISSION (Quick SOFA Score)
More than 1 following criteria:
- Systolic blood pressure <100mmHg
- Respiratory rate >22
- Glasgow conscious score <15

SEVERE FAILURE CRITERIA (consider cesarean delivery)
- SEPTIC SHOCK
- ACUTE ORGAN FAILURE
- FETAL DISTRESS

DELIVERY

Before 24 WG
if severe maternal illness, consider MTP (if legal)

After 24 WG
- On site / IRNP
- Vaginal delivery (induction of labor + instrumental delivery when possible unless severe failure criteria)
- Early clamping of umbilical cord and cleaning of newborn
- Newborn monitoring in IRNP
- SARS-CoV-2 RT-PCR of the newborn
- Breastfeeding with due precautions and considerations
- Mother isolated from newborn until viral shedding resolves

* **PROTECTIVE GEAR**
Contact and Airborne additional measures
- FFP2 or N95 mask
- Gloves
- Gown
- Eye protection