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### **PURPOSE:**

To prevent the spread of infection due to COVID 19 while managing labor and delivery.

### **OBJECTIVES:**


To standardize operating procedures (Delivery Room) during Emerging and Re-emerging Infectious Disease Outbreak.

### **RESPONSIBLE PERSON:**

Obstetrician-Gynecologists, Attending Physicians, Delivery Room Staff and Health Care Personnel

### **GENERAL GUIDELINES**


- All patients for Delivery Room shall pass thru the Emergency Room Triage Area for Preliminary Assessment.
- If not tagged as Probable or Suspect, but as a regular patient, the OB resident shall be notified and the patient shall be wheeled to the Delivery Room (for non-emergency cases). The OB resident in the Delivery Room will assess the patient (after endorsement of ER Staff via phone). (Since we have COVID local transmission now) Delivery Room Staff/team and Doctors attending to the patient should wear Delivery Room – Covid 19 PPE (surgical mask/cloth face mask, disposable surgical cap, face shield, impermeable gown, disposable gloves).
- Once tagged as a Probable or Suspect OB Client, the patient shall be directed to the OB Tent.

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- An OB resident will be notified by the ER to assess the patient in the OB Tent. The OB resident will classify the patient as: 1.) For Admission, 2.) For Referral to other institution / hospital and 3.) For "Send Home" or advises patient accordingly (Note: The OB resident should wear full PPE when assessing the patient and can ask assistance from the triage tent ER nurse assigned – to minimize Delivery Room staff exposure and the use of PPE)
- COVID designated Delivery Room shall undergo Terminal Cleaning and misting (4 to 6 hours) after each procedure prior to its next use.
- The COVID Designated Delivery Room can only accommodate 1 patient at a given time. Admission will be dependent on the availability of the room.
- The Reproductive Health Unit patients (under the service of House Case OB/Gyne) are advised to communicate directly to OB residents / department (please provide contact number or messenger accounts for consultations/ telemedicine). Assessment for Admission will be done by the OB resident.
- No Visitors Directives:

All patients are allowed 1 watcher only and will stay in the watchers' designated area. Watchers will also pass thru the ER triage and will undergo interview and health assessment. All patients and watchers should wear mask.


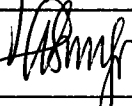

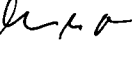

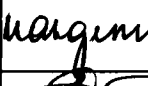

- PPE for Delivery Room
  - NON COVID / Non Probable or Suspect
    - NSVD: Disposable Cap, Surgical Mask, Impermeable Gown / Apron, Clean or Sterile Gloves (depending on function)
    - CS/Gyne Procedures: Taffeta Coverall/ Hazmat (with booties), Disposable Cap, N95 mask, face shield or goggles, Disposable Booties and sterile gloves (2 pairs), Impermeable/Disposable Gown


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○ COVID (+) / Probable / Suspect Patient

- Both for NSVD and CS /Gyne Procedure: Taffeta Coverall/ Hazmat (with booties), Disposable Cap, N95 mask, face shield or goggles, Disposable Booties and sterile gloves (2 pairs), Impermeable/Disposable Gown (those who will scrub will wear sterile disposable gown).

**APPROVAL:**


	Name/Title	Signature	Date
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Recommending Approval:	MARIAN T. TAN, MD, FPOGS Chairman, Obstetrics and Gynecology Department		4/21/20
	HENRY F. ALAVAREN, MD, FPSMID Total Quality Division Officer		4/24/20
	MA. ANTONIA S. GENSOLI, MD, FPCHA Medical Director		4-28-2020
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		12/28/2020

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## **PROCEDURES:**

### **A. ADMISSION OF PROBABLE, SUSPECT, or COVID 19 POSITIVE PATIENT**


1. OB Resident calls the Delivery Room for admission of Probable, Suspect or COVID (+) patient. All necessary endorsements will be done via the telephone.
2. Delivery Room prepares the Team and needed equipment and supplies and will start donning of their PPEs.
  - 2.1. Normal Spontaneous Vaginal Delivery
    - 2.1.1. Private: OB Consultant, Delivery Room nurse, (NICU nurse or additional OB Resident or Delivery Room Staff depending on the condition of the baby), Pediatric Consultant and Pediatric Resident
    - 2.1.2. House Case: (2) OB Residents, Delivery Room Nurse, (NICU nurse or additional OB resident or Delivery Room staff depending on the condition of the baby) and Pediatric HC Consultant and Pediatric Resident.
  - 2.2. CS / Gyne Operation: (Make sure the Consultant and the team are ready prior to bringing patient up in the COVID Room)
    - 2.2.1. Private: OB Consultant, OB Resident, Anesthesiologist, Circulating Nurse, Scrub Nurse/OR Tech (NICU Nurse depending on the condition of the baby) and Pediatric Consultant and Pediatric Resident
    - 2.2.2. House Case: (2) OB resident, Anesthesia Resident, Circulating, Scrub (NICU nurse depending on the condition of the patient) and Pediatric HC Consultant and Pediatric Resident.
3. Once ready, the Delivery Room Nurse/ OB Resident calls the OB COVID tent Emergency Room that the patient can now be brought to the Delivery Room. The Emergency Room Nurse places a MASK (N95 or Surgical Face Mask) on the patient before she is wheeled directly to the COVID Designated Delivery Room. Transport protocols shall strictly be followed.

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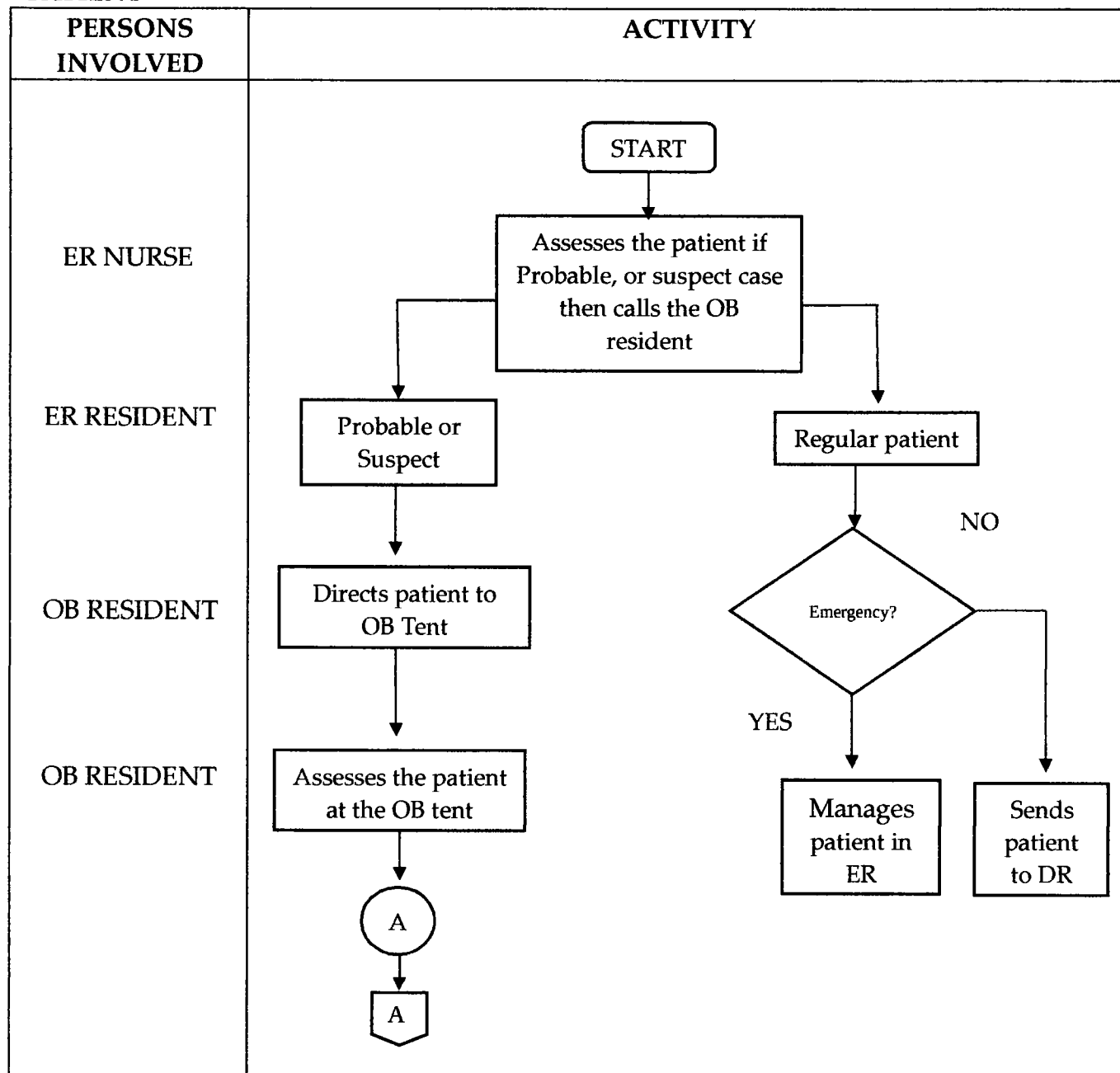
4. Once the patient arrives in the COVID Designated Delivery Room, the labor and delivery management procedure shall start (re-assessment, re-examination, monitoring, and delivery).
5. Post-partum recovery and monitoring shall be done in the COVID Designated Delivery Room until patient is wheeled off to her room.

#### **B. TRANSPORTING PROBABLE/ SUSPECT/ COVID POSITIVE PATIENT AFTER DELIVERY.**

1. Delivery Room Nurse endorses patient to the STAFF NURSE of the designated Isolation Room through the telephone. Likewise the Nurse will also endorse the baby to the staff nurse of the designated isolation room.
2. Delivery Room Nurse places new face mask on the patient before transporting her to her assigned room.
  - 2.1. Baby: will be transported following protocols by the Delivery Room or NICU ( if the baby is unstable)
  - 2.2. Route: from Delivery Room to Station 3 alley turn left to elevator access to isolation rooms or to 5<sup>th</sup> floor.
3. After the endorsement and when the patient is ready for transport, the auxiliary personnel with complete/full PPE, shall transport the client (mother) to the station.

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### FLOWCHART: ADMISSION OF PROBABLE, SUSPECTED, or COVID 19 POSITIVE PATIENT

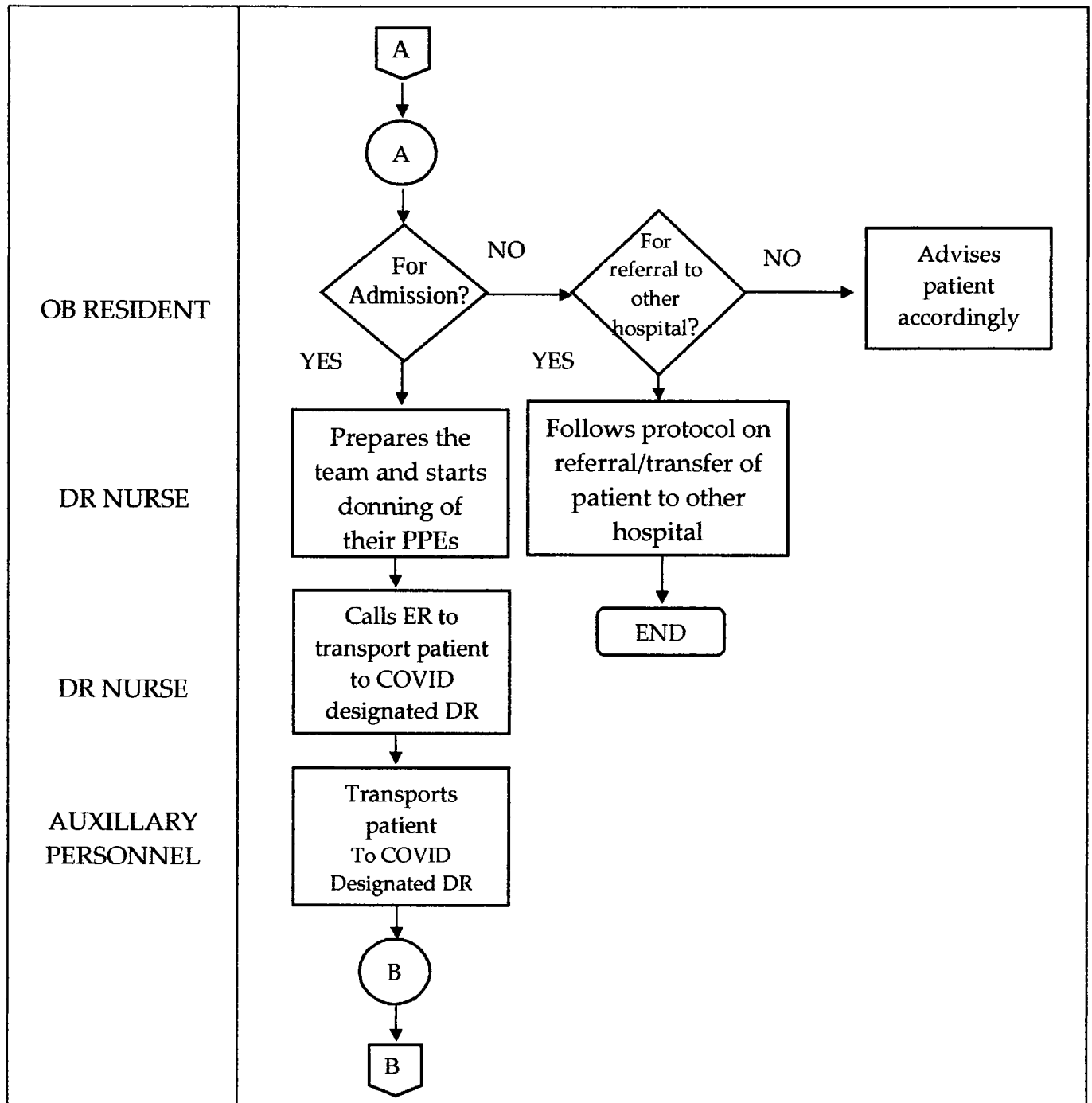




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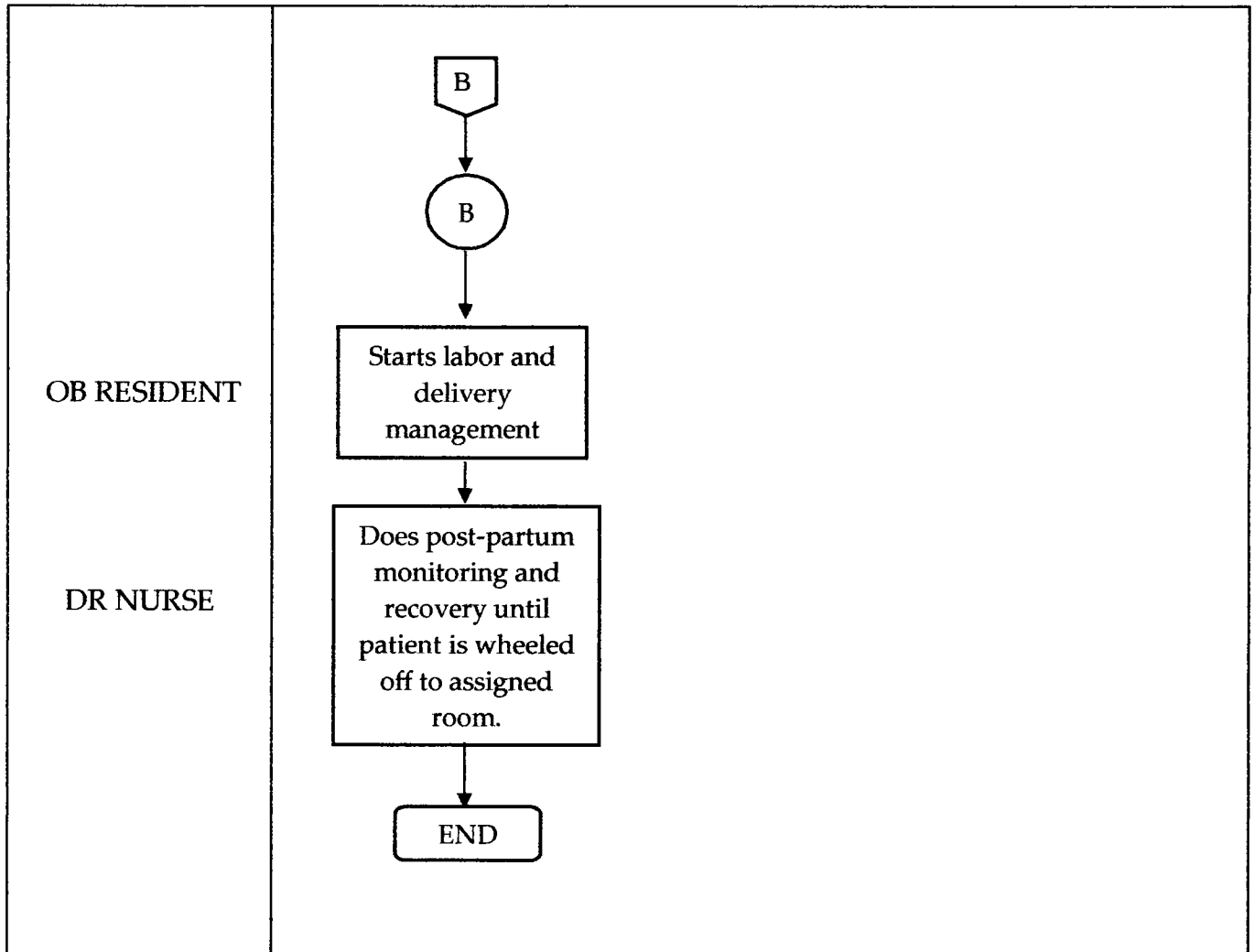





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