1. Can I limit the amount of time spent in the clinic or hospital for my prenatal care?

   - SEARHC is using telehealth appointments when appropriate for low-risk obstetrical patient visits. Blood pressure monitors are available for loan to prenatal patients without significant risk factors, so that they can take their BP prior to telehealth appointment. To obtain a free blood pressure machine, call OB Nurse Case Manager at 907.966.8941. You will also need to have a scale to provide your weight. Accurate weight and BP measurements are significant and required by doctors at each prenatal visit.
   - Prenatal care and testing will be clustered when possible to minimize exposure to the hospital environment. Ultrasounds, labs, and OB visits with providers are scheduled on the same day as frequently as possible.
   - SEARHC is offering prenatal classes and breastfeeding support via telemedicine.

2. What precautions have been put in place for when I come in for a prenatal visit?

   - We contact all patients to screen for COVID-19 risk factors before their visit. If a patient has symptoms of COVID-19, they will be asked to reschedule their appointment and encouraged to have COVID-19 testing.
   - Patients are again screened at the front entrance to Mt. Edgumbe Medical Center (MEMC), and their temperature is taken before their visit.
   - Patients traveling to Sitka from another community will have COVID-19 testing before entering the hospital and will be included in the travel plans put in place for scheduled care.
   - Visitation to MEMC has been limited and is by exception only. All visitors are asked screening questions, and their temperature is taken when entering each SEARHC facility.
   - Universal mask usage is in place on Sitka campus.
   - Many changes in patient flow have been put in place to limit the possible exposure of our OB patients. These include:
     - Prenatal labs are being drawn on the second floor by the Labor and Delivery RNs to minimize exposure to patients at the main lab.
     - Minimized contact between well and sick patients.
     - Waiting rooms are arranged to meet social distancing requirements.
     - Young children who cannot wear a mask are being seen in an alternate location if possible.
   - Facility cleaning of patient care areas has been enhanced consistent with State and CDC guidance.
3. What staff precautions has SEARHC put in place to keep me safe?

- All employees at MEMC are tested for COVID-19 every week or more frequently when indicated.
- All employees are asked screening questions and have their temperature taken daily when entering work facilities.
- Scrubs worn by staff while working in the hospital are not worn outside the facility. Employees change into and out of scrubs in the workplace. Scrubs are professionally laundered in the facility.
- Nurses who interact with OB patients are assigned to the OB unit. They do not care for patients on the medical floor or ER where COVID-19 patients might be treated.
- Medical staffing will be arranged to maximize the safety of pregnant patients and their babies. OB providers will follow clinic and hospital precautions regarding the use of PPE and avoiding exposures.

4. What other steps can I take to keep me and my baby safe before my delivery?

- All OB patients coming from outside of Sitka to MEMC for delivery will be asked to self-isolate for 14 days when they arrive.
- OB Patients living in Sitka are encouraged to limit activity and contacts in the last three weeks of pregnancy to avoid unnecessary exposure.
- Recommendations from the American College of Obstetrics and Gynecology include:
  - Washing hands often with soap and water for at least 20 seconds.
  - Cleaning hands with a hand sanitizer that contains at least 60% alcohol if you cannot wash them (rub until your hands feel dry).
  - Avoiding touching your eyes, nose, and mouth.
  - Staying home as much as possible.
  - Staying at least 6 feet away from other people if you need to go out.
  - Avoiding people who are sick.

5. When it is time to deliver my baby, what else is SEARHC doing to keep me safe in the hospital?

- There will be no COVID-19 positive patients admitted to labor and delivery.
- All labor patients and their partners will undergo rapid COVID-19 testing in a negative pressure room before being allowed into the unit.
6. **What if I have a COVID-19 infection when it is time to deliver my baby?**

- Mothers testing positive for COVID-19 will labor and deliver in a designated room, separate from labor and delivery. This room will be stocked and staffed consistently with the standards of care on the L&D unit. The mother will remain in this room to complete her post-partum care.
- The staff will work with COVID-19 positive parents to determine the best ways to keep their babies safe and reduce the risk of viral transmission to the newborn.
- Patients requiring a C-section will deliver in a COVID-19 dedicated operating room, which is equipped for such patients.
- Pregnant women who are very ill with COVID-19 disease will be transferred to a higher level of care to manage their infection and pregnancy further.

7. **Who can be with me in the hospital when I deliver my baby?**

- Laboring patients may have one support person while in the hospital. This individual must also test negative for COVID-19. We recognize the importance of a doula for some but cannot allow more than one individual in the room.
- The labor support person may leave the hospital but will be rescreened upon re-entry. No other individuals, including family members, will be allowed to visit after your baby has delivered. We understand that siblings and grandparents cannot wait to meet the baby, but this will have to wait until you are discharged!

8. **How else can I stay safe during my pregnancy during this pandemic? Should I go out or stay at home? Is it safe for my partner/husband or kids to be out in the community?**

- As noted above, pregnant patients and the family members should adhere to current CDC guidelines as best as possible: [https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnancy-breastfeeding.html](https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/pregnancy-breastfeeding.html). These CDC recommendations include: practicing social distancing, washing your hands often, covering coughs and sneezes, cleaning and disinfecting frequently touched surfaces, and laundering items safely. It is important to receive recommended prenatal care. Although there is no vaccine to protect against the virus that causes COVID-19, receiving vaccines such as influenza (Flu) and Tdap during pregnancy can help protect you and baby from illness before and after delivery. Avoid unnecessary trips outside of your home and travel away from your home community is discouraged unless the travel is truly necessary.
9. Should pregnant women wear a mask or face covering?
   - As of April 3, the CDC says all people, including pregnant women, can wear a cloth face covering when they are in public to slow the spread of COVID-19. Face coverings are recommended because studies have shown that people can spread the virus before showing any symptoms.
   - Wearing a cloth face covering is most important in places where you may not be able to stay 6 feet away from other people, like a grocery store or pharmacy. But you should still try to stay at least 6 feet away from others whenever you leave home.

10. Am I more susceptible to COVID-19 because I am pregnant?
    - According to CDC, pregnant people appear to have the same risk of COVID-19 as adults who are not pregnant.
    - According to the American College of OB/GYN (ACOG), current reports show that pregnant women do not have more severe symptoms than the public. But researchers are still learning how the illness affects pregnant women.
    - We urge pregnant women to take the same steps as the public to avoid coronavirus infection.

11. If I became ill with COVID-19, what would happen to my baby?
    - Staff and physicians will discuss options with the new parents.
    - We want your baby safe and you can either keep your infant in the room with a barrier, or out of the room and cared for by your labor support person and nursing. All options will be discussed with the parents of the baby to make the safest plan of care for a baby.

12. How can COVID-19 affect a fetus?
    - According to ACOG It is too early for researchers to know how COVID-19 might affect a fetus. Some pregnant women with COVID-19 have had preterm births, but it is not clear whether the preterm births were because of COVID-19. It is not likely that COVID-19 passes to a fetus during pregnancy, labor, or delivery, but more research is needed.

13. Are guidelines and advice for breastfeeding changed under the pandemic?
    - Breastfeeding is still encouraged during the pandemic.
    - So far, the virus has not been found in breast milk. But there is not enough information on whether women who are sick can pass the virus through breast milk.
SEARHC’s main priority is patient and staff safety.

• Breast milk gives babies protection against many illnesses. It also is the best source of nutrition for most babies.

• If you have COVID-19, breastfeeding can still occur with specific provisions
  o Masking of Mother
  o Good handwashing techniques
  o Hand expression and spoon or cup feeding instead of at the breast.
  o Have someone who is not sick feed your breast milk to your baby after you pump.

14. Who can accompany me or visit me during delivery and after delivery?
Who can accompany me to prenatal visits?

• We allow one support person in the room for prenatal visits and during labor.
  o Father of the baby or the mother’s choice of support.
  o No visitors other than the mother’s chosen support person.