MASSACHUSETTS GENERAL HOSPITAL
OBSTETRICS & GYNECOLOGY

HARVARD MEDICAL SCHOOL

MGH OB COVID-19 Inpatient Flowsheet

v.4-3

Patient screened at entry: known +COVID or symptoms?

Symptoms: cough, sore throat, fever (subjective or documented), muscle aches, runny nose or nasal congestion, shortness of breath, loss of sense of smell

- screen → Routine care

Intrapartum fever OR new symptoms during admission → patient becomes PUI

+ screen = PUI (person under investigation)
or
known + COVID

Notify: PCIA, OB/CNM, MFM, Resource RN, Anesthesia, DR1

All providers don/doff appropriate PPE when interacting with patient: gown, gloves, goggles, surgical mask (unless AGP, then N95)

If PUI:
1. Order "COVID-19 Isolation and Testing Panel"
2. Collect NSP swab for flu/RSV/COVID with PPE (including N95)
3. Page biothreats to ask for expedited testing

*Routine blood cultures not indicated for all fever work-ups, ordered per clinician discretion

Delivery?

not planned but admission needed → Review case with MFM

MFM to determine appropriate unit for admission with Med Senior

planned → Cesarean

if non-urgent and PUI, await testing results to avoid maternal-infant separation if negative

Vaginal delivery

Labor:
Early epidural, no nitrous
Time of delivery:
N95 for providers
Page DR1 "COVID" if pedi team needed for routine indications

Communicate plans early
Review PPE, airway concerns in huddle
Minimize providers in OR
Use PPE from isolation cart by OR
N95s for all providers
Page DR1 "COVID" for delivery

Neonatal Care	Routine delayed cord clamping; NO skin-to-skin; Mother baby co-locate, separated 6 ft Pumped breastmilk or formula given to baby by healthy caregiver (refer to nursing protocol) If no healthy care giver available or maternal status worsens, infant moved to nursery/NICU
Maternal Postpartum Disposition	If main issues are COVID-related: COVID ward with MFM following (coordinate with Med Senior) If main issues are not COVID-related: postpartum floor with ID consulting If uncertain of appropriate disposition: discuss with MFM

N95 Reuse/Extended Use Guidelines:
If no AGP used for mom or infant, N95 can be REUSED
If AGP used for mom or infant, N95 can be worn for EXTENDED uses (must be discarded once removed)

AGPs (aerosolized generating procedure) commonly used on L&D for mom or infant:
intubation, deep suctioning, CPAP, nasal swabs for COVID testing | Nasal cannula O_2 is NOT an AGP