

OB/GYN TREATMENT & CARE FOR NON-COVID-19 PATIENTS

OB/GYN Appointments

- For the health and safety of our patients and staff, RRH Women's Health Clinic has instituted specific protocols to reduce clinic and hospital traffic thereby reducing the possibility of Covid-19 exposure and transmission.
- We have reduced clinic hours and can accommodate only essential in-person clinic visits. Our new clinic hours for in-person visits are Tuesday and Thursday 830—to 1230 am. Nursing staff and OBGYN providers will be available in clinic Monday through Friday to answer by phone any and all OB and GYN questions or concerns. Call our clinic for any OBGYN issue at: 760-499-3640.
- In keeping with social distancing, all patients with appointments will be asked to provide notification of their arrival by calling from their car.
- Patients are required to attend all appointments alone, including any OB ultrasounds.
- RRH Women's Health Clinic will be prioritizing in-person clinic visits with priority given to obstetrical patients. If and when possible, gynecological problems will attempt to be managed via phone and/or telemedicine visits.
- The clinic is notifying all gynecology patients with current appointments and requesting that they re-schedule their appointments for a later date. Annual well woman exams, pap smears, etc will be delayed. Patients are being asked to schedule gynecology appointments for June or later.
- For gynecological problems that are non-urgent, patients can call our clinic to determine if a telemedicine visit is required. Patients are encouraged to call the clinic for prescription refill requests regarding birth control, hormone replacement, or other medications previously prescribed by one of our OBGYN providers.
- All elective gynecologic surgeries have been cancelled at this time. Emergency gynecologic surgeries for abnormal bleeding/hemorrhage, miscarriage, or ectopic pregnancy, will be available as previous.
- All OB patients will continue to receive routine prenatal care and testing with our OBGYN providers. Modifications to the frequency of prenatal visits have been made to reduce patient exposure and risk of Covid-19 infection. The following reflects key prenatal visit appointments that will be made with the focus of grouping in-person visits with important labs, ultrasounds, and immunizations that are recommended during obstetrical care:



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OB Appointment Schedule: Low-Risk Patients

- First OB Visit (telephone visit) - doctor interview to evaluate pregnancy and risk status
- 12 wks: (in-person visit) - dating ultrasound, routine obstetrical lab panel, genetic testing
- 20wks: (in-person visit) - fetal anatomy ultrasound
- 24 wks: (in person visit) - gestational glucose tolerance testing
- 30wks: (in person visit) - vaccinations, RhoGam
- 36wks: (in person visit) - GBS culture
- 38wks: (in person visit)
- 40wks: (in person visit)

OB Appointment Schedule: High-Risk Patients

- High-Risk OB patients will continue to be seen with greater frequency per the recommendation of their provider.

Women's Imaging services for OB ultrasounds will now be performed in the Women's Health Clinic.

MATERNAL & PEDIATRIC VISITATION, TREATMENT & CARE FOR NON-COVID-19 PATIENTS

Non-COVID-19 Maternal Inpatients:

- One support person only. No switching out of support people.
- The support person must stay in the room. Support persons should minimize coming and going from the hospital. Ideally the support person would stay from admission to discharge with no coming and going during the expected mothers stay.
- We understand that many families have other children at home and need to attend to them, and we encourage them to do so, but stress the importance of minimizing coming and going from the hospital to protect both mom and baby.
- Visitor screening is in effect – no visitor will be allowed who has fever and/or respiratory symptoms.

Newborns:

- Newborns who are medically stable will be discharged at 24 hours.
- Newborns will be seen either in clinic or the hospital's maternal child wing to follow weight and jaundice, as needed during the first days and weeks of life.
- Newborns will be screened/admitted in a clean area apart from main screening activities.

Non-COVID-19 Pediatric Inpatients:

- Patients who under 18 years are allowed to have one parent/guardian with them at all time.
- The visitor must stay in the room. Parents should minimize coming and going from the hospital. Ideally the parent would stay from admission to discharge with no coming and going during the child's stay.
- We understand that many families have other children at home and need to attend to them, and we encourage them to do so, but stress the importance of minimizing coming and going from the hospital to protect both parent and child.
- Visitor screening is in effect – no visitor will be allowed who has fever and/or respiratory symptoms.

Pediatric & Children's Family Medicine Appointments:

- Well checks will require a brief telemedicine appointment followed by an in-person visit when due or as soon as possible thereafter.
- Only one parent/guardian allowed to accompany the child during the office visit.
- Sick babies and children will be evaluated and treated via telemedicine consult.



MATERNAL AND PEDIATRIC TREATMENT & CARE FOR PATIENTS SUSPECTED OR POSITIVE FOR COVID-19

Maternal Patients Suspected or Positive for COVID-19

- RRH has a designated room for triaging non-pregnancy related complaints for pregnant mothers who might be seen on our maternal child unit.
- For maternal patients who are suspected or positive for COVID-19 with pregnancy complaints we have designated a room for triaging and a room for labor and delivery.
- RRH also has a designated OR should a suspected or positive for COVID-19 maternal patient require surgery.

Pediatric Patients Suspected or Positive for COVID-19

- RRH has dedicated rooms for patients who are suspected or positive for COVID-19.
- One parent is allowed to stay with child to support both child and nursing staff. The parent would also be considered suspected for COVID-19.
- In the event that a pediatric patient requires a ventilator, RRH would put the patient on a ventilator as part of stabilization for transport.
- The pediatric patient will be cared for at RRH while arrangements are made for the patient to be transferred to a hospital with a Pediatric Intensive Care Unit that has capacity.
- RRH continues to evaluate equipment and options available in preparation for the event of a pediatric surge.

**Maternal Child Services
(760) 499-3131**

**Women's Health Services
(760) 499-3640**

**Pediatrics (Rural Health Clinic)
(760) 499-3846**

**Family Practice (Southern Sierra Medical Clinic)
(760) 446-6404**

