

Supporting your Perinatal Units During COVID-19:

Health Equity for California Latinx Communities

September 29, 2020

CMQCC
California Maternal
Quality Care Collaborative

CPQCC
california perinatal
quality care collaborative

Webinar Logistics

- Attendees are automatically muted upon entry
- The “chat” function has been disabled. **Please utilize the Q&A box if you are having technical difficulties and to submit any questions you have for the presenters.** We will answer a select number of questions relevant to the topics presented during the Q&A portion of the webinar. The remainder of the questions may be used to inform the topics of future webinars in this series.
- **The slides and webinar recording will be made available on www.CAperinatalprograms.org shortly after the webinar.** Due to the rapidly changing guidelines around COVID-19, the slides and recording may be taken down after two weeks.

Disclaimer

- The information shared in this webinar series and on our resource site serve as examples of how hospitals, healthcare workers, and families in California are responding to COVID-19. We understand that each hospital is working with a different set of resources and constraints. As such, some of the recommendations presented may not apply to your hospital setting. Guidelines and recommendations should be adapted to fit your local needs.
- As this is a rapidly evolving public health situation, we encourage you to consider the most recently available local health department and CDC guidance when developing your internal protocols.

Today's Presenters

- **Diana Robles, MD** - Maternal-Fetal Medicine Fellow, Department of OBGYN and Reproductive Sciences, University of California, San Francisco
- **Cristina Gamboa, MD** – Director of Ambulatory Women's Health Services, Department of OB-GYN, Salud Para La Gente
- **Carmin Powell, MD** – Clinical Assistant Professor of Pediatrics, Stanford University School of Medicine; Co-Director, LEAD Program at Stanford Medicine; and Site Director, Chair Pediatric Department, Watsonville Community Hospital
- **Robert Castro, MD** – Clinical Professor of Pediatrics, Stanford University School of Medicine and NICU Medical Director, Salinas Valley Memorial Hospital

** Today's presenters have nothing*

Today's Agenda

Topic	Presenter
Welcome	Courtney Breault, MS, RN
Introduction	Diana Robles, MD
Barriers to Obstetric and Neonatal Care and Actionable Items	Carmin Powell, MD Cristina Gamboa, MD
Outreach, the Effects of Moving a Patient Away from their Community, and Translation	Robert Castro, MD
Community Connections, Partnerships and Networking	Cristina Gamboa, MD
Closing Thoughts	Carmin Powell, MD
Q&A Session	Moderated by Christina Oldini, MBA, RN, CPHQ & Courtney Breault, MS, RN
Closing	Christina Oldini, MBA, RN, CPHQ

Introduction

Diana Robles, MD



HEALTH

200,000 deaths later, Latinx leaders say it didn't have to be this way

Latinx leaders across the nation react to the grim milestone.

The Coronavirus's Outsized Impact On California's Latino Communities

July 18, 2020 · 5:06 PM ET

Heard on [All Things Considered](#)

NATIONAL

'Our Communities Are In Crisis': Latinos And COVID-19

August 26, 2020 · 5:00 AM ET

Heard on [All Things Considered](#)

THE SACRAMENTO BEE

California wants to know more about coronavirus and ethnicity after surge in Latino cases

BY [KIM BOJÓRQUEZ](#)

JULY 28, 2020 05:53 PM

University of California San Francisco

■ [Patient Care](#) · May 4, 2020

Initial Results of Mission District COVID-19 Testing Announced

Latinx Community, Men and Economically Vulnerable Are at Highest Risk

By [Elizabeth Fernandez](#) and [Nicholas Weiler](#)



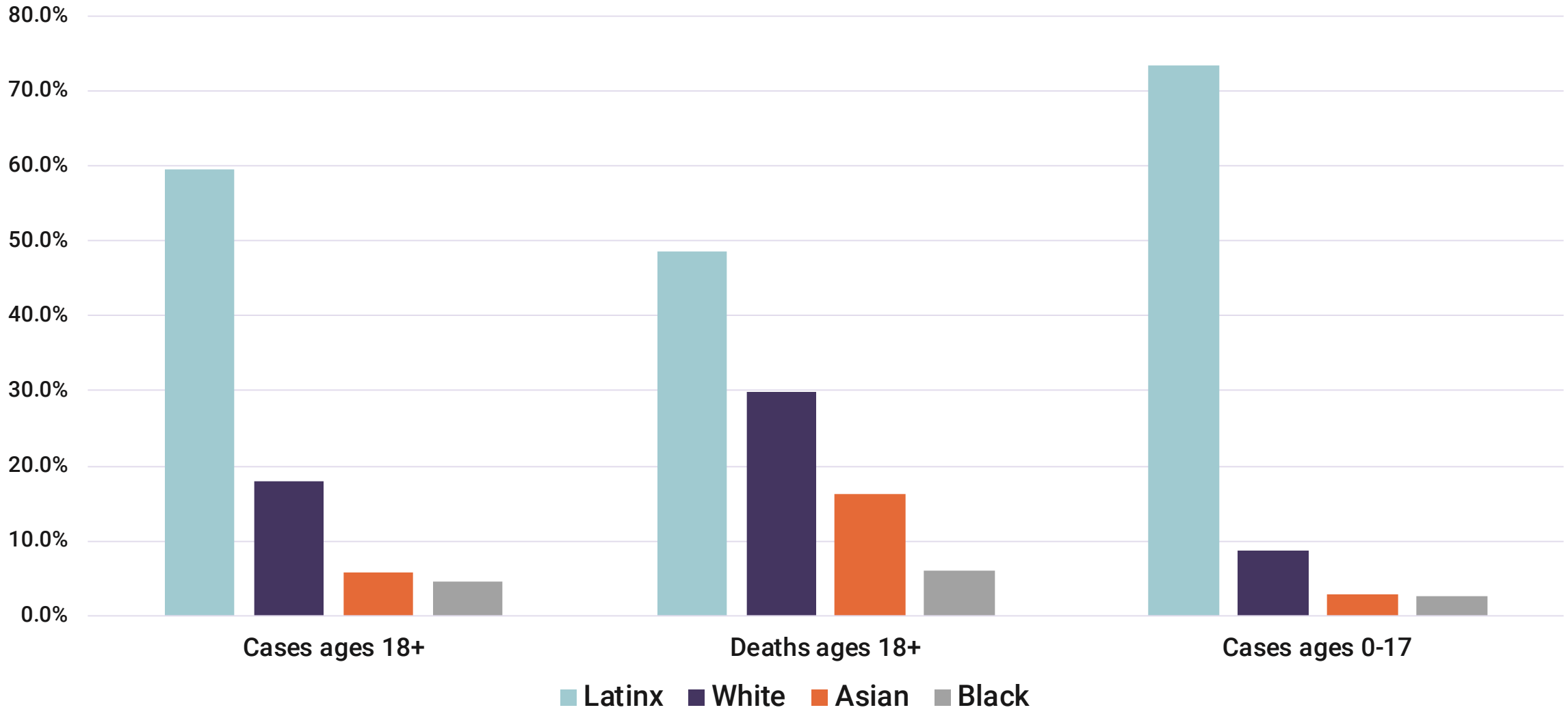
Why Latinos in California are being hit hard by Covid-19



By [Stephanie Elam](#), CNN

🕒 Updated 6:20 PM ET, Thu September 3, 2020

Proportion of Cases and Deaths by Race and Ethnicity in CA as of Sept 22, 2020



<https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/COVID-19/Race-Ethnicity.aspx>

Pregnant people in the Latinx community are disproportionately affected by SARS-CoV-2 infection

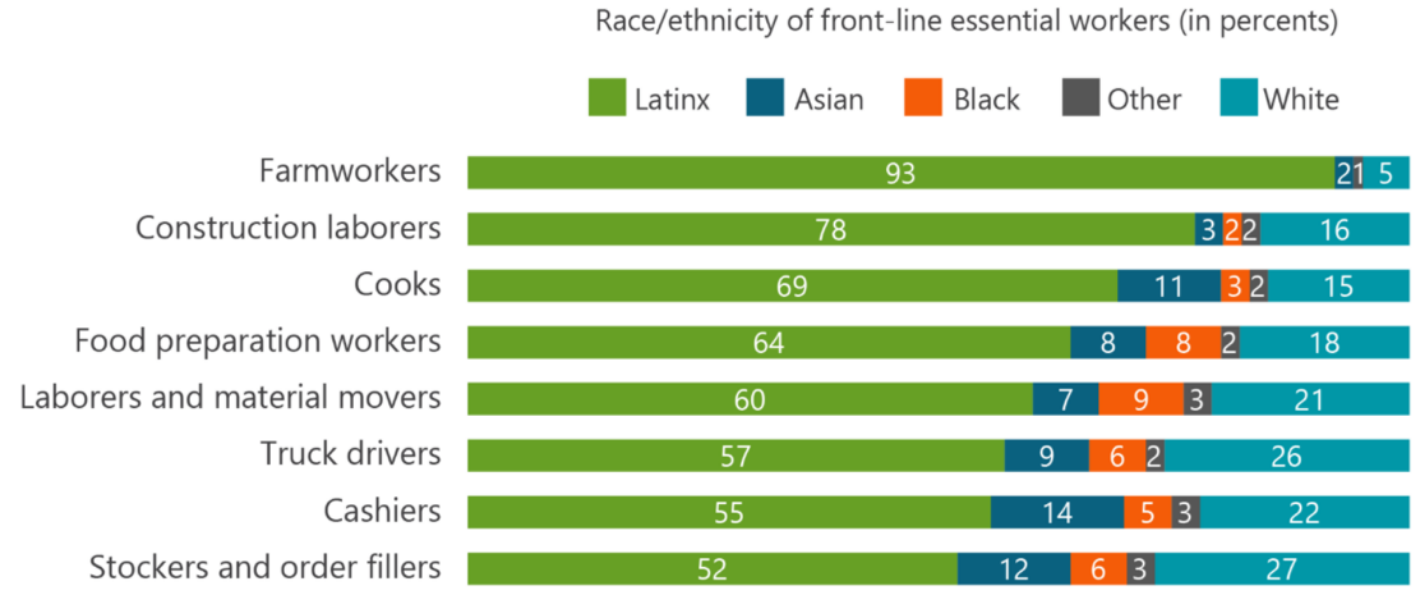
TABLE 1. Demographic characteristics, symptoms, and underlying medical conditions among women aged 15–44 years with known pregnancy status and laboratory-confirmed SARS-CoV-2 infection (N = 91,412),* by pregnancy status — United States, January 22–June 7, 2020

Characteristic	No. (%)	
	Pregnant women (n = 8,207)	Nonpregnant women (n = 83,205)
Age group (yrs)		
15–24	1,921 (23.4)	19,557 (23.5)
25–34	4,469 (54.4)	31,818 (38.2)
35–44	1,817 (22.1)	31,830 (38.3)
Race/Ethnicity[†]		
Hispanic or Latino	3,048 (46.2)	22,394 (38.1)
Asian, non-Hispanic	254 (3.8)	1,869 (3.2)
Black, non-Hispanic	1,459 (22.1)	14,922 (25.4)
White, non-Hispanic	1,520 (23.0)	17,297 (29.4)
Multiple or other race, non-Hispanic [§]	321 (4.9)	2,299 (3.9)

<https://www.cdc.gov/mmwr/volumes/69/wr/mm6925a1.htm>

The Essential Workforce in California

Figure 4: Race/ethnicity of front-line essential workers, top 15 occupations, California, 2018

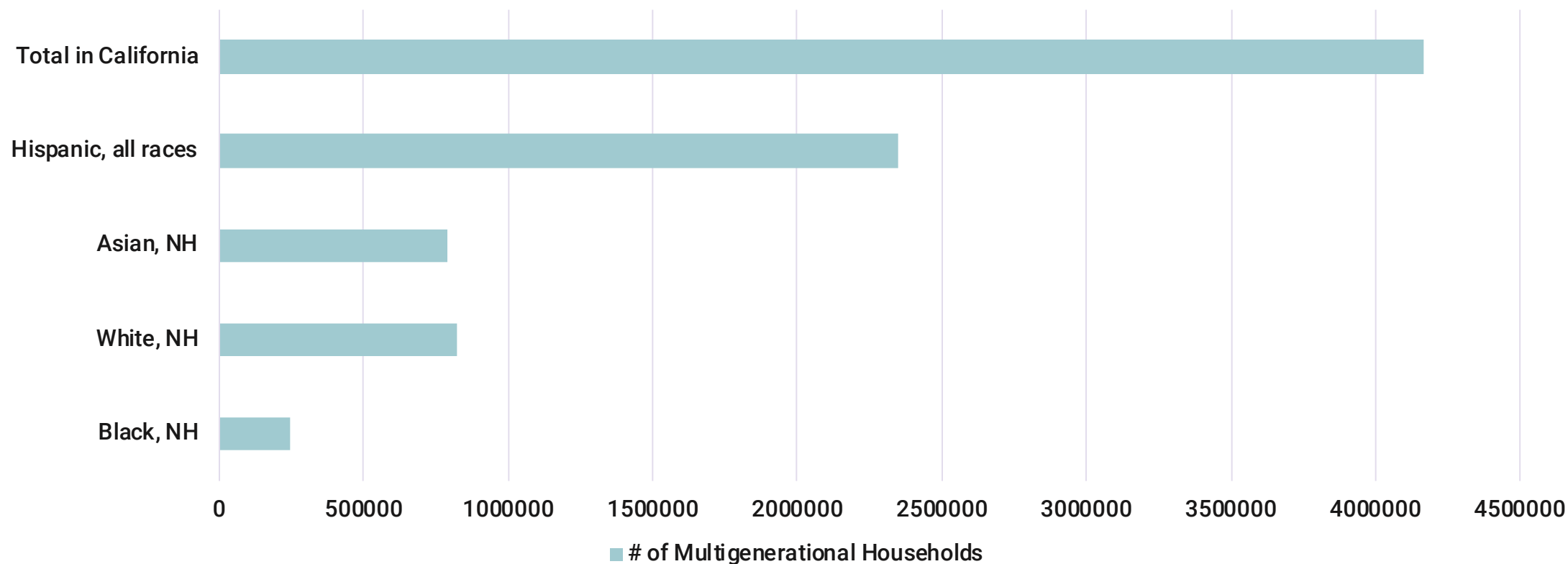


Latinx workers are overrepresented in many front-line occupations

<https://laborcenter.berkeley.edu/front-line-essential-jobs-in-california-a-profile-of-job-and-worker-characteristics/>

Majority of multigenerational households in California

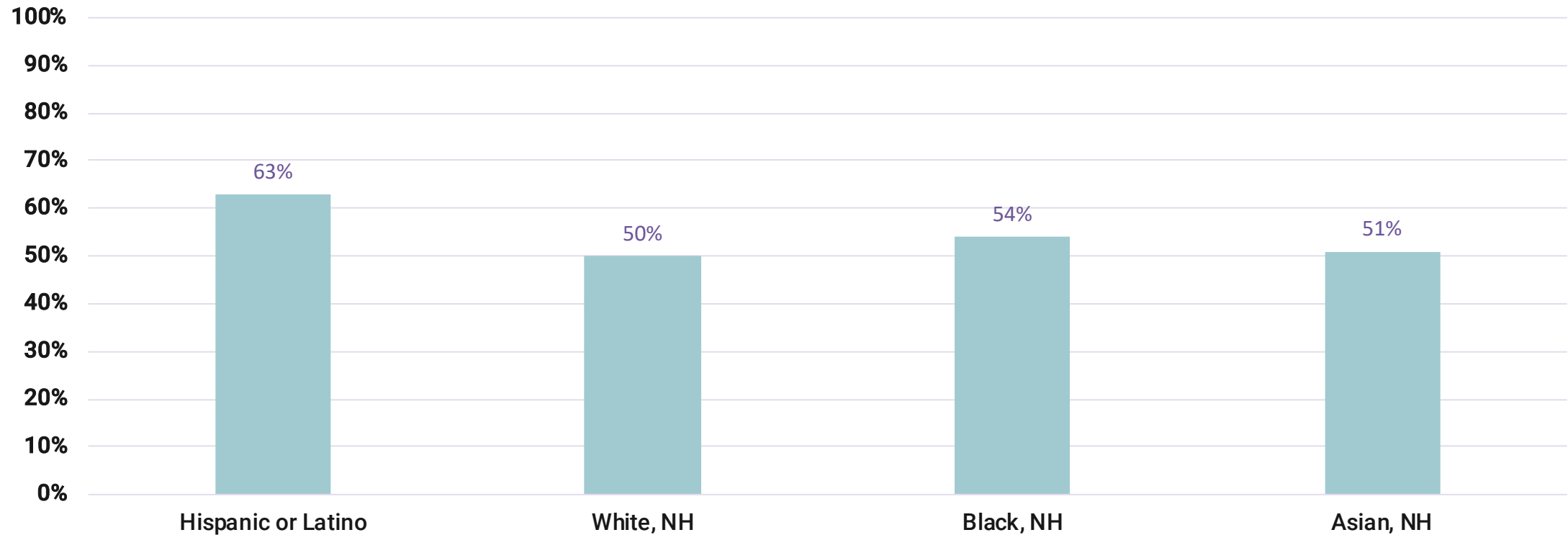
of Multigenerational Households



US Census, <https://data.census.gov/cedsci/> American Community Survey 2018

Estimated higher loss of employment income

% of population that experienced loss of employment income since March 13, 2020



US Census, Household Pulse Survey <https://www.census.gov/data/tables/2020/demo/hhp/hhp14.html>, Sept 2-14

Systemic factors that contribute to increased risk

- Proportion of essential workforce
- Housing factors
- Extent of economic impact
- Healthcare access and utilization

Barriers to Obstetric and Neonatal Care and Actionable Items

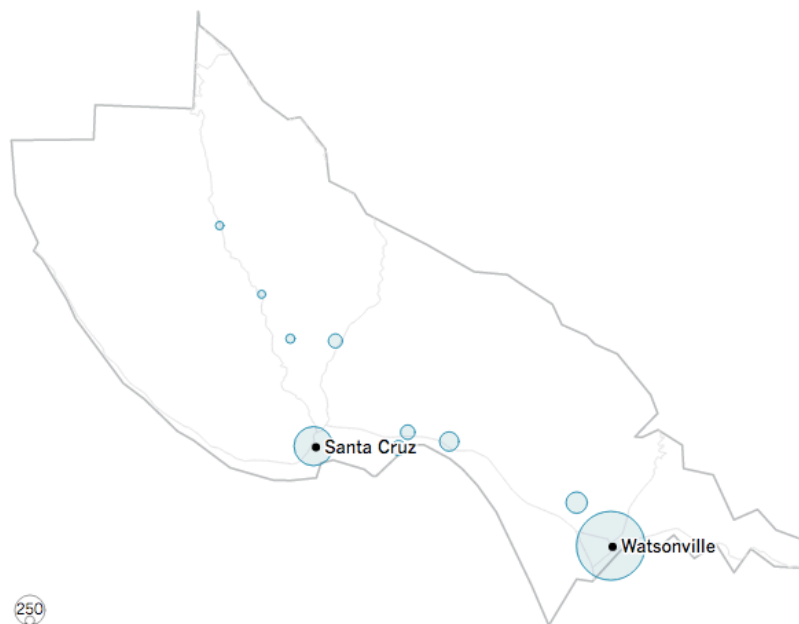
Carmin Powell, MD
Cristina Gamboa, MD

COVID-19 Trends

- Nationwide, Hispanic or Latina mothers make up nearly half of the coronavirus cases among pregnant women, according to data from the [Centers for Disease Control and Prevention](#)

Mapping the cases

Cases have been reported in 10 of Santa Cruz County's cities and communities:



Area	Confirmed cases
Watsonville	1,289
Santa Cruz	418
Freedom	124
Aptos	102
Capitola	62
Soquel	58
Scotts Valley	55
Unincorporated	24
Felton	23
Boulder Creek	19



Known cases by race/ethnicity

Race / Ethnicity	# Known Cases	% Known Cases	% County Population
Asian Alone	28	1.22	4.43
Black or African American Alone	9	0.39	0.86
Hispanic/Latino	1,421	61.94	33.49
Multiple Races	21	0.92	3.28
Other	49	2.14	0.40
Unknown	355	15.48	0.00
White/Caucasian Alone	411	17.92	57.55
Total	2,294		

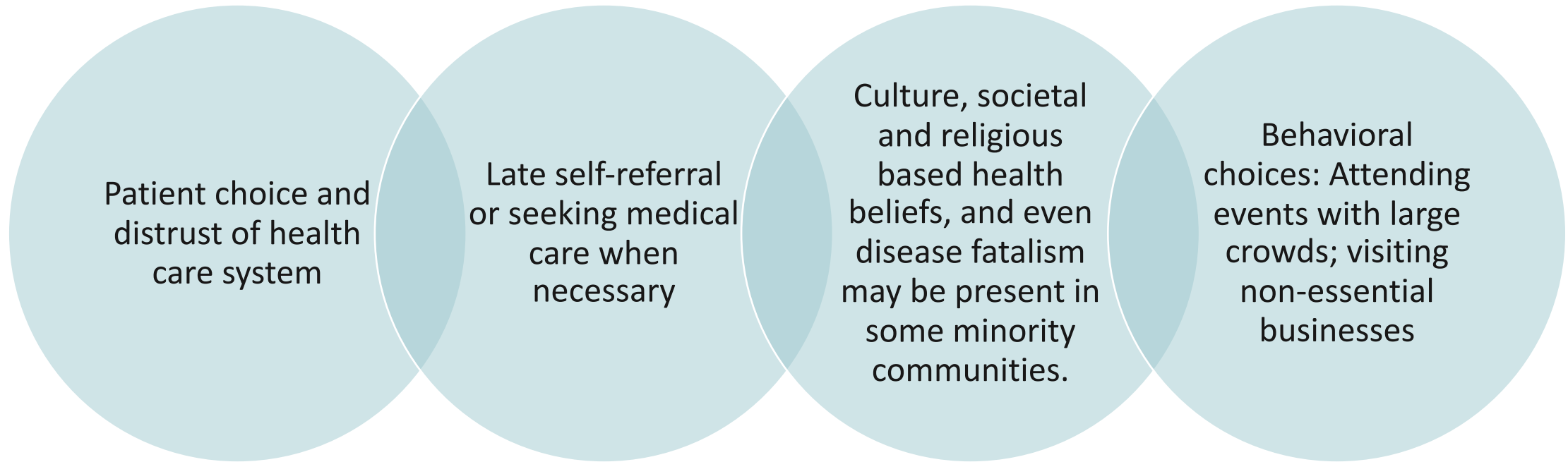
*Race/Ethnicity categories with 5 or less reported cases have been reported as "Other."
 **% County Population is a 2018 Census Population Estimate.

Social Determinants of Health

- **Examples of SDOH that have been exacerbated in Latinx communities during COVID-19 pandemic**
 - Biological risk factors may reflect environmental exposures (ex. Diabetes, Asthma, HTN)
 - Poverty/Low-income
 - Limited jobs and social mobility
 - Working as essential or frontline
 - Working in jobs with lack of adequate PPE (ex. Meat plants, field work)
 - Use of public transportation, relying on crowded buses, subways
 - Living conditions where social distancing is impossible
 - Living in food deserts or places without access to healthy foods
 - Underinsured, self-rationing of health care as a strategy
 - Limited education and poor health illiteracy



Human Factors



An adequate pandemic response requires understanding of the cultural differences that drive these choices.

Bias and Systemic Inequalities

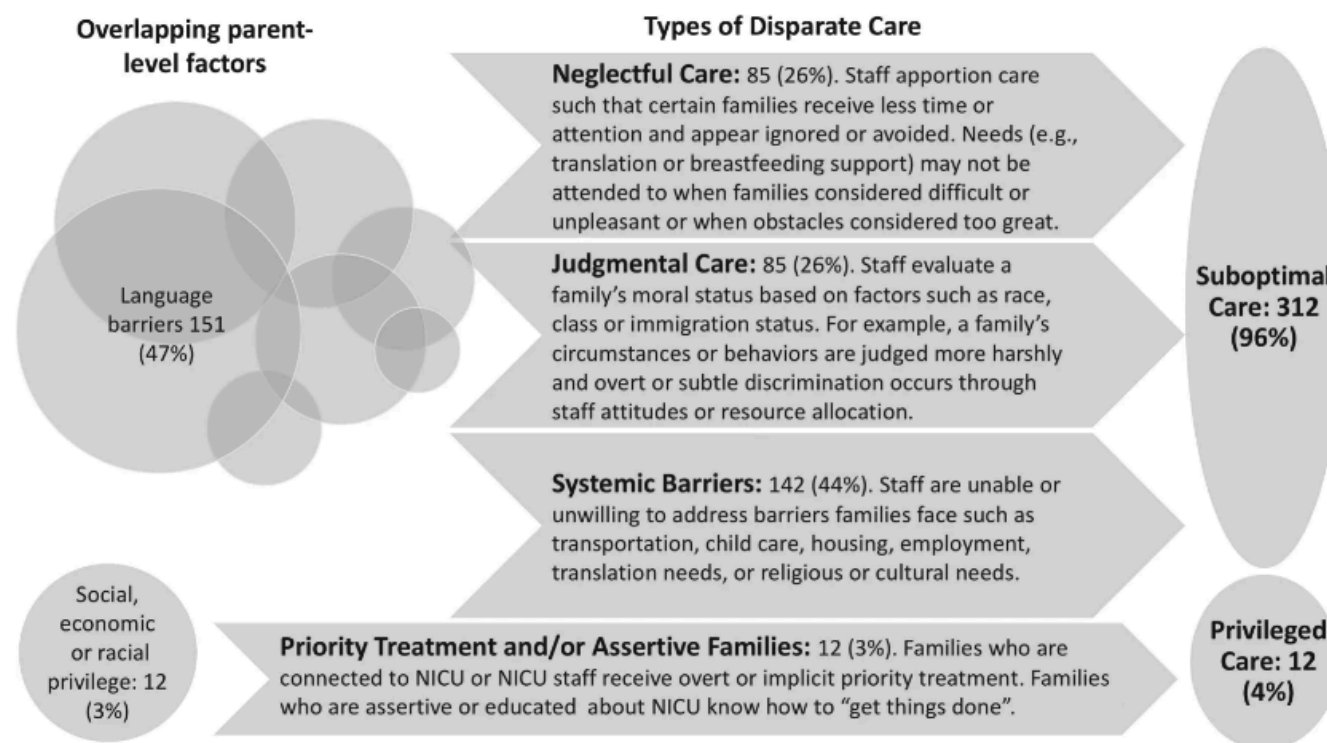
- Workforce diversity within health care makes a difference, especially for decision-making by minority patients.
- Persistent racial, ethnic, and cultural incongruity between physicians and patients, especially for Latinx patients that comprise ~ 39% population in CA
- Unconscious and conscious racial bias in health care exists, especially towards our marginalized and immigrant populations
- Lack of cultural competency/humility training healthcare workforce
- Adverse social determinants of health and systems of structural racism

These factors can lead to variation in treatment options and care for Latinx, Black, Indigenous and Native patients with COVID-19.

Barriers in NICU/Nursery setting

Fig. 1

From: Disparities in NICU quality of care: a qualitative study of family and clinician accounts



Disparities in NICU quality of care: a qualitative study of family and clinician accounts, Krista Sigurdson, Christine Morton, Briana Mitchell & Jochen Profit. [Journal of Perinatology](#) volume 38, pages600–607(2018)

Types of disparities in care. Accounts described neglectful care, judgmental care, and systemic barriers to care leading to suboptimal care or priority treatment or assertive families leading to better care Overlapping family-level factors led to suboptimal care, whereas social, economic, or racial privilege let to better care.

Barriers in NICU/Nursery setting



- Unclear and not applicable guidance for NICU/nursery care
- Restrictive visitation policies impacting NICUs and nurseries
- Disruption of early neonatal and maternal bonding (i.e. skin to skin contact, breastfeeding)
- Limited testing capacity and screening for spouse/support person
- Inabilities to adapt space to accommodate infection control precautions

Barriers in Latinx Obstetric Population & Actions To Address

- Access to care and testing availability
 - Staff and resource adjustment
 - Partnership with entities providing novel testing and expedited results
- Language and literacy barriers
 - Bi/Tri-lingual multi-media patient education & information resources
 - Culturally proficient resources
- Immigration status
 - Coverage regardless of immigration status
 - Patient advocacy and medical-legal partnership

Barriers in Latinx Obstetric Population & Actions To Address

- Strict visitor policies
 - Flexible policy development
 - Use of technology during prenatal care, labor and delivery
- Active employment in pregnancy as an essential worker
 - Communication and education to agencies employing essential workers
 - Surveillance testing for employers of essential workers
- Stigma, concern of vertical transmission and fear of disclosing COVID-19 infection
 - Availability of behavioral health services
 - Alignment of OB and Pediatric patient education & information

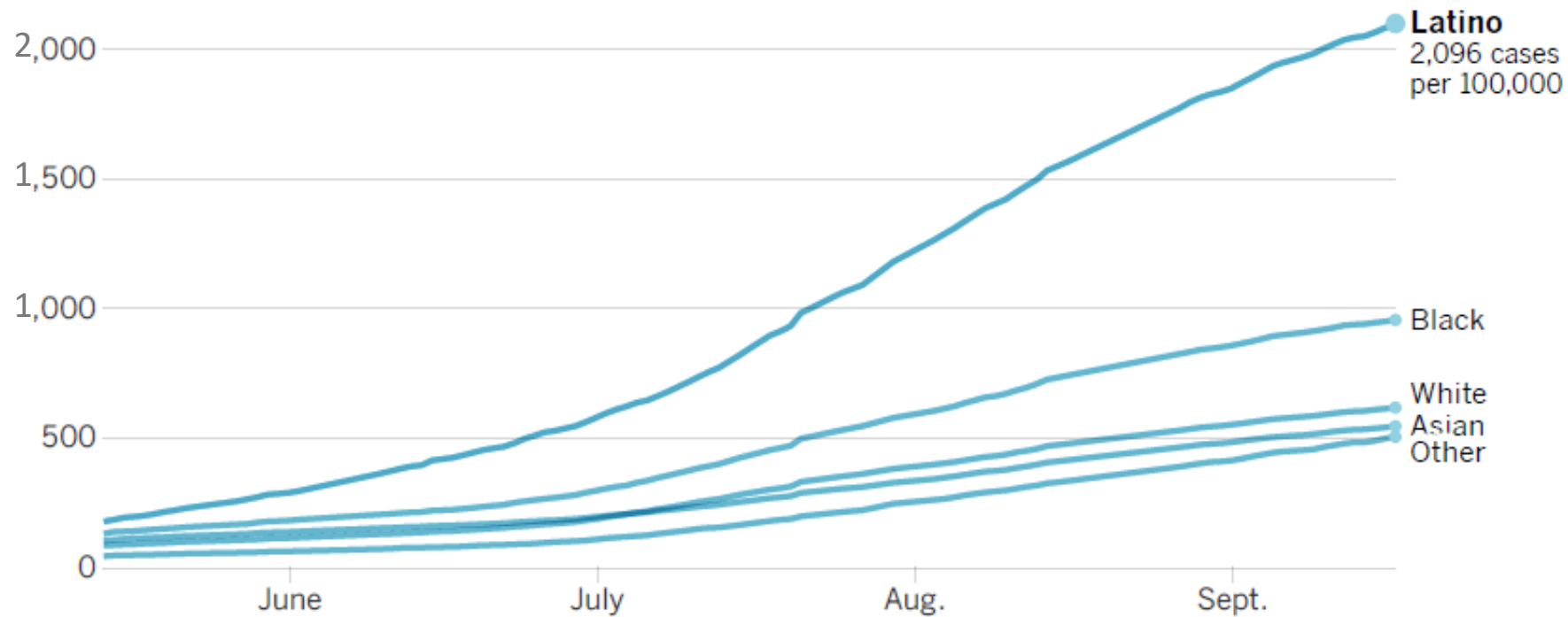
References

- **Disparities in NICU quality of care: a qualitative study of family and clinician accounts**, Krista Sigurdson, Christine Morton, Briana Mitchell & Jochen Profit. [Journal of Perinatology](#) volume 38, pages600–607(2018)
- **Advancing Health Equity by Translating Lessons Learned from NICU Family Visitations during the COVID-19 Pandemic.** Pang E, Sey R, De Beritto T, Lee H. C., Powell C. Neoreviews. January 2021. 22 (1) 10.1542/neo.22-1-e1000
- **Racial/ethnic disparities in neonatal intensive care: a systematic review.** Sigurdson K, Mitchell B, Liu J, et al. Pediatrics. 2019;144(2): e20183114. doi:10.1542/peds.2018-3114
- **Our responsibility to follow through for NICU infants and their families.** Horbar JD, Edwards EM, Ogbolu Y. [published online ahead of print June 16, 2020]. Pediatrics. doi:10.1542/peds.2020-0360
- **Centers for Disease Control and Prevention. Coronavirus disease 2019 (COVID-19).** <https://www.cdc.gov/coronavirus/2019-ncov/hcp/non-us-settings/hcf-visitors.html>. Accessed August 25, 2020
- **Stanford Office of Faculty Development and Diversity (OFDD) Resources - Equity and COVID-19 -** <https://med.stanford.edu/diversity/equity-and-covid-19.html>
- **AAP Update & Resources on Coronavirus Disease 2019 (COVID-19) -** <https://aapca1.org/update-resources-on-coronavirus-disease-2019-covid-19/>
- **AMA COVID-19 health equity resources -** <https://www.ama-assn.org/delivering-care/health-equity/covid-19-health-equity-resources>

Outreach, the Impact of Moving a Patient Away from their Community, and Translation

Robert Castro, M.D.

COVID-19: CA Cumulative Cases/100K



The other category includes Native Americans and people of two or more races.

California Department of Public Health

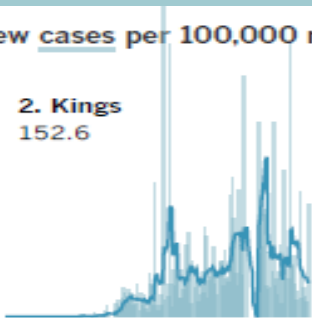
COVID-19: CA Counties Cases (new) per 100K

Counties ranked by new cases per 100,000 residents

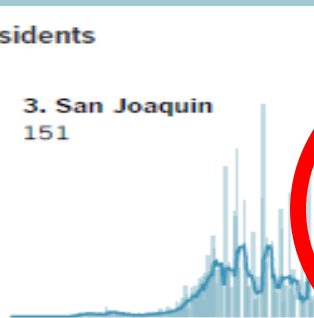
1. Imperial
175.3
cases per 100k
in last 7 days



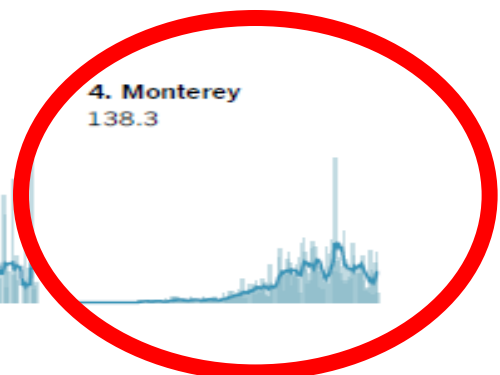
2. Kings
152.6



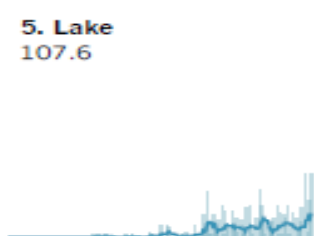
3. San Joaquin
151



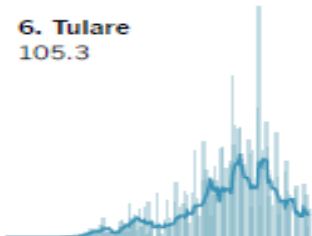
4. Monterey
138.3



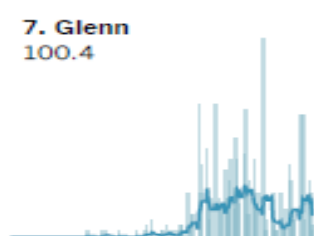
5. Lake
107.6



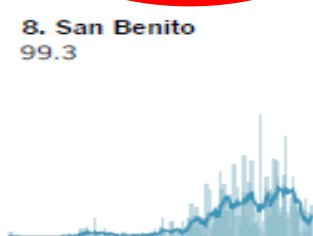
6. Tulare
105.3



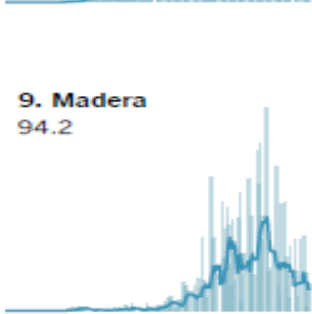
7. Glenn
100.4



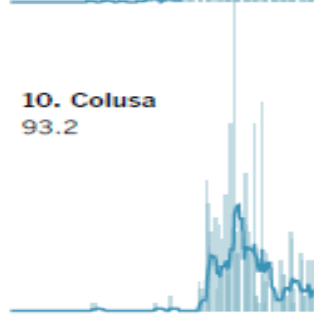
8. San Benito
99.3



9. Madera
94.2

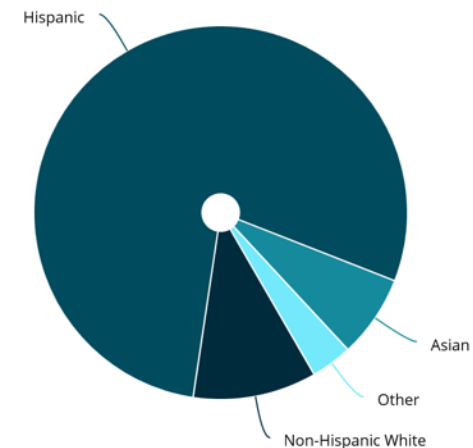


10. Colusa
93.2



Salinas Valley Memorial Hospital NICU

Race/Ethnicity Distribution for all VON Small Babies
Radii proportional to % with Eye Exam

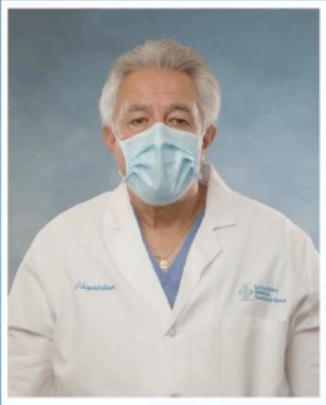


The content in these slides is current as of Sept 29, 2020.



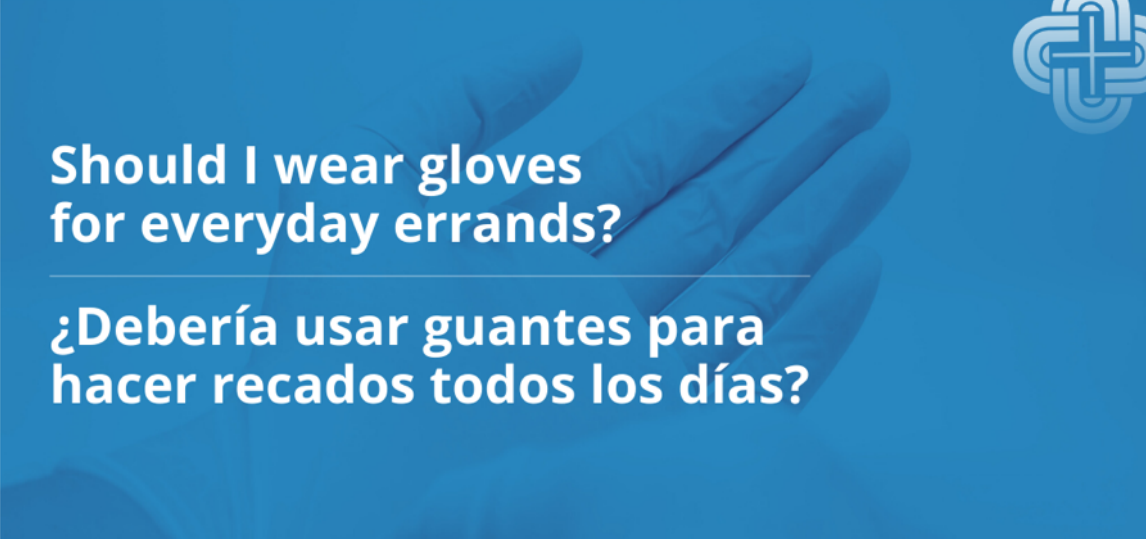
Outreach Obstacles

- EDUCATION



Cómo Usar La Mascarilla Correctamente

Salinas Valley
Memorial
Healthcare System



Should I wear gloves
for everyday errands?

¿Debería usar guantes para
hacer recados todos los días?

Outreach Obstacles

- EDUCATION



Facebook Live
Orlando Rodriguez, MD
y Michael Sepúlveda, MD

Tema: COVID-19, La Cuarentena
y la Influenza

Lunes, 14 de septiembre
3pm hora del pacífico

SINTONICE FACEBOOK LIVE @SVMHS



Outreach Obstacles – Ag Workers Education



Outreach Obstacles – Ag Workers Education

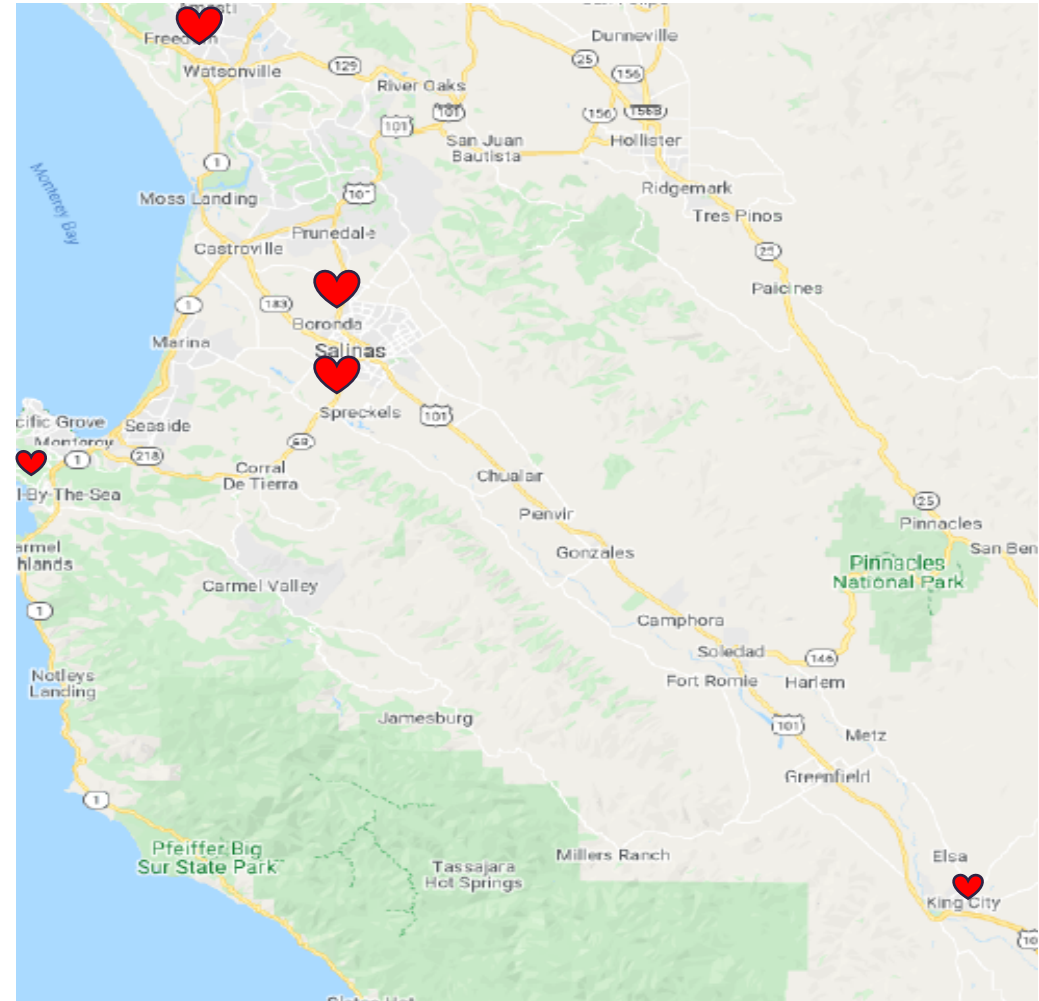
Sabor Farms	253	Costa Farms	180
Ortiz Bros.	150	Taylor Farms	3200
Driscoll's Family Farms	200	Christensen & Giannini	400
Nature Bloom	300	D'Arrigo Bros.	1000
Ascona Harvesting	150	Filice Farms	30
MarVista Farms	150	Harvest Pacific	55
Royal Oaks	550		
Dole	800		
Elkhorn Packing	801		
Braga Ranch	1250		
Foothill Packing	1600		
Church Bros.	700		



Community Perinatal Care

Access to community perinatal care:

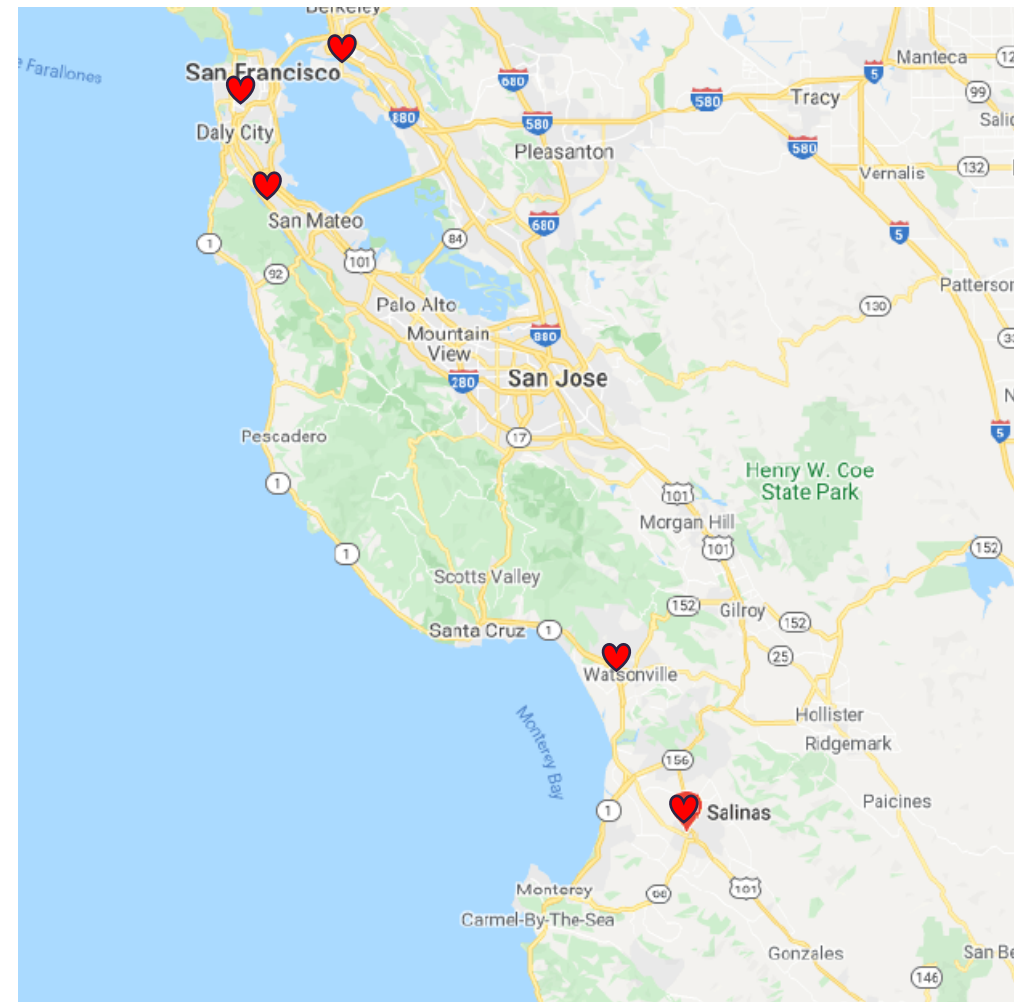
- 5 Hospitals/Monterey and southern Santa Cruz counties



Regional Perinatal Care Transports

Access to regional perinatal care:

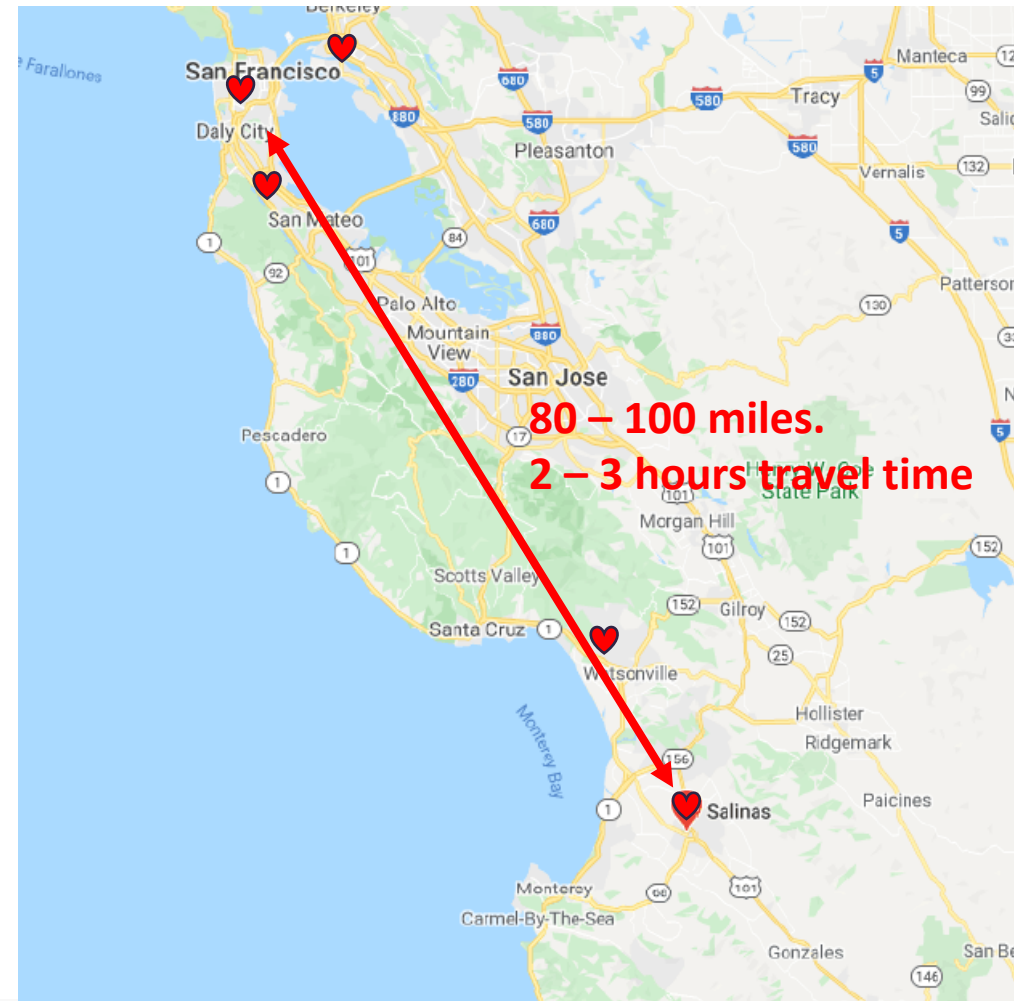
- Bay Area - 3 Regional Centers
- Perinatal/Neonatal Transports
- COVID-19



Regional Perinatal Care

COVID-19:

- Parental/Family Support Separation.
- Distance/Traffic
- Housing
- Visitor Restrictions
- Outpatient appts.



Community/Regional NICU Care



Language Barrier

- Spanish - On Demand Translation/Translators
- Arabic, Mandarin, Vietnamese, Russian, etc., including Sign language.
- Some systems promote over 240 languages).



Language Barrier

- Spanish Translation/Translators



Facebook Live
Orlando Rodriguez, MD
y Michael Sepúlveda, MD

Tema: COVID-19, La Cuarentena
y la Influenza

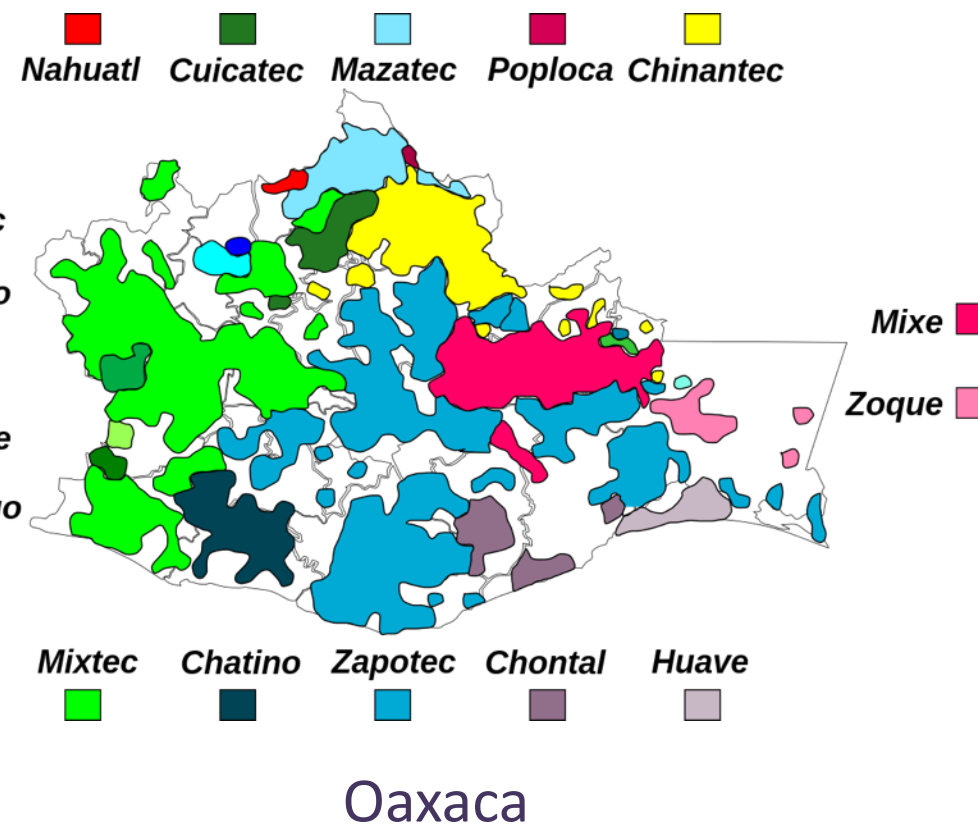
Lunes, 14 de septiembre
3pm hora del pacífico

SINTONICE FACEBOOK LIVE @SVMHS



Language Barrier

- Non-Spanish Monolingual Latinx/Hispanic Population



Access Barrier – Digital Divide

Digital divides impact access to:

- Healthcare updates
- Internet educational tools
- Virtual healthcare appointment
- Digital video/NICU

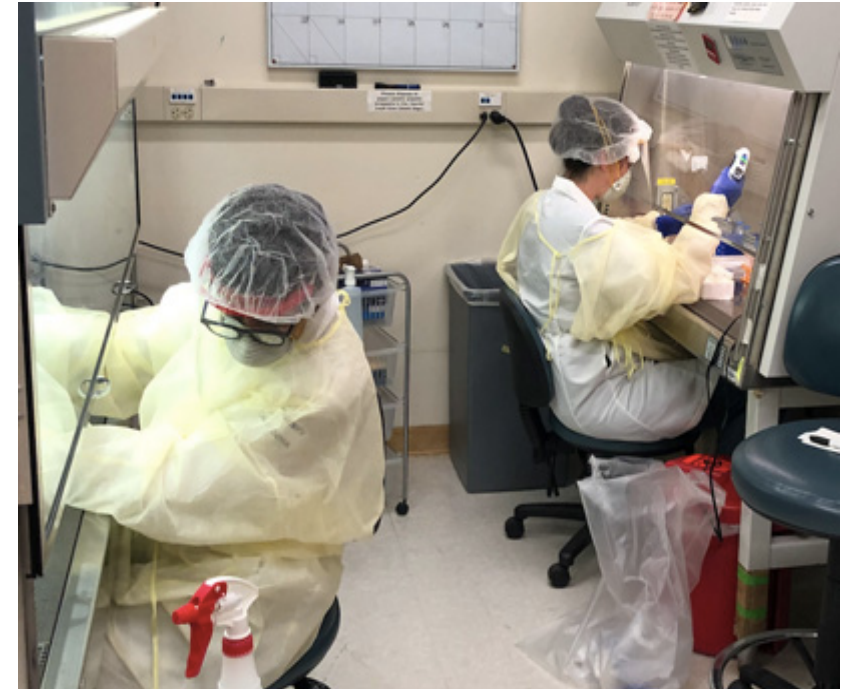


Community Connections, Partnerships, and Networking

Cristina Gamboa, M.D.

Community Partnership: Medical Collaboration & Access to Care

- County Health Department and cross county physician collaboration
 - Emergency privileges for medical providers
- University of California Santa Cruz Molecular Diagnostic Lab
 - Provided novel testing with direct communication of results
 - Partnered with Community Health Centers to assure testing is available regardless of ability to pay
 - Cost of tests provided by Community Foundation



Community Partnerships: Multisector Collaboration

- **Save Lives-Pajaro Valley Community Group**
 - Ensure all community households have the information & resources they need to remain healthy and well during & beyond COVID-19
- **Thriving Immigrant Collaborative**
 - Community forums to provide health education and resources
- **Pajaro Valley Unified School District**
 - Connect to PVUSD students & their families to provide essential community information to ensure they know how to access healthcare services and how to stay safe during COVID-19



Community Partnership: Family Essentials

- Second Harvest Food Bank
 - Weekly food distribution at clinic sites
- UndocuFund
 - Financial relief for immigrant households affected by the pandemic



Closing Thoughts

Carmin Powell, M.D.

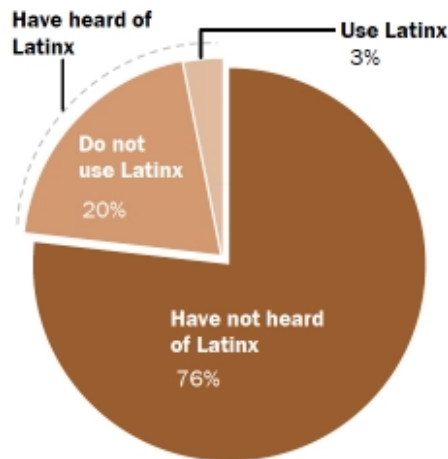
CMQCC

CPQCC

Latino/a, Latinx, Hispanic

Most Latino adults have not heard of the term Latinx; few use it

% who ...



Note: No answer responses not shown.
Source: Survey of U.S. Latino adults conducted Dec. 3-23, 2019.
"About One-in-Four U.S. Hispanics Have Heard of Latinx, but Just 3% Use It"

PEW RESEARCH CENTER

" Good article. At the end of the day, one of the issues about disenfranchising people is having someone else tell you what you should be called. I think the group of Latinos in this country are just becoming aware of what they can do, so it is important that everyone get the chance to say who and what they are. I think this is true for many groups of color. I will have two grandchildren next year, and they will hopefully get to decide what they want to be called."

- Fernando Mendoza MD, MPH, Emeritus Professor of Pediatrics (Active), Associate Dean of Minority Advising and Programs



Strategic Support

Academic Centers' Opportunities to Help Communities of Color:

- Access to health care
 - Linking with community health care systems: SCCPH/ SCVMC, FQHC, physician networks in underserved communities
 - Close the gap on health facilitators: Interpreter services, technology- telehealth, combined services for complex care (Complex Care Clinic)
- Research on health disparities: basic, clinical and policy
- Educational – train a diverse physician workforce & educate all health professionals in social determinants /unconscious bias in health care
 - COEDME: Pipeline, Leadership/Advocacy, Social Justice Curriculum/ UCB
 - Grant for COVID-19 and Telemedicine HRSA Grant- CARES ACT
- Advocacy for Underserved – Faculty involved with residents/ students

Slide courtesy of Fernando S. Mendoza, MD, MPH, Emeritus Professor of Pediatrics (Active), Associate Dean of Minority Advising and Programs



Research on Health Care Policy to Improve Community Health

How does DACA affect the health of America's children?

Since 2012, DACA has provided temporary protection from deportation to almost 800,000 unauthorized immigrants in the United States.



See full study in the journal *Science* for details on results and methods: Jens Hainmueller, Duncan Lawrence, Linna Martén, Bernard Black, Lucila Figueroa, Michael Hotard, Tomás Jiménez, Fernando Mendoza, Maria Rodríguez, Jonas J. Swartz, and David Laitin, "Protecting unauthorized immigrant mothers improves their children's mental health."

ipl immigration policy lab



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EQUITABLE MATERNAL HEALTH COALITION

OUR VISION

To ensure safe, affordable, sustainable and intentionally equitable access to care that advances safe motherhood and healthy pregnancy outcomes, as well as prevents maternal risks and death.

March of Dimes is the backbone organization for the Equitable Maternal Health Coalition and provides governance and management, policy development and advocacy, data and research, and communication and outreach efforts.

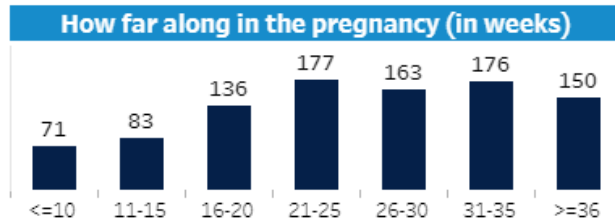
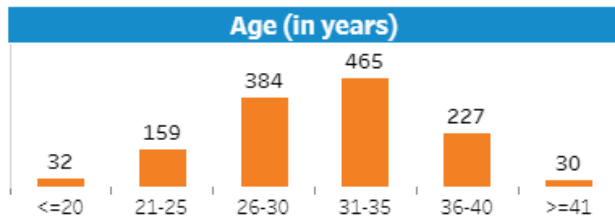
FOR MORE INFORMATION, PLEASE VISIT EMHC'S WEB SITE:
WWW.EQUITABLEMHC.ORG



PRIORITY: Pregnancy Coronavirus Outcomes Registry

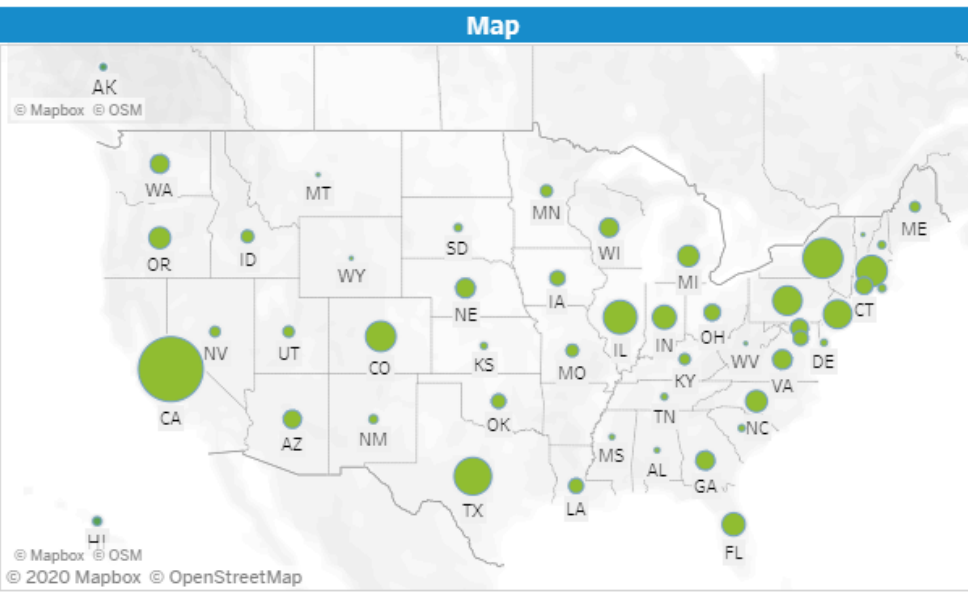
PRIORITY Study Participant Characteristics

Enrolled	COVID Status			Current Pregnancy Status	
1,310	846 COVID+	226 COVID-	238 Other	535 Pregnant	775 Recently Pregnant



Race/Ethnicity

American Indian/Alaska Native: 1.1%
Asian: 6.0%
Black or African American: 9.7%
Hispanic or Latina: 35.0%
Native Hawaiian or Other Pacific Islander: 1.2%
Unknown: 4.7%
White: 49.4%



On May 4, 2020, we launched a Reproductive Health Equity and Birth Justice Core aimed at increasing community partnerships and recruitment efforts among Black, Indigenous, and People of Color. We strive to ensure that PRIORITY participants appropriately represent racial and ethnic groups that have experienced the highest number of COVID-19 cases and deaths.



<https://priority.ucsf.edu/>

Take Home Points to Achieve Equity

- Perinatal units must provide multi-lingual, culturally relevant resources to dispel misinformation regarding COVID-19
- Assess and address needs of marginalized/vulnerable populations to combat health disparities
- Collaborate to mitigate structural and systemic barriers in your perinatal units
- Engage in advocacy efforts and community-based partnerships to support patients and families
- Educate yourself and colleagues on SODH, bias, structural and systemic racism in healthcare
- Linking academic health care centers with community health care systems to provide robust systematic and evidence-based care to underserved communities

VOTE! VOTAR!



Q&A

*Moderated by
Christina Oldini, MBA, RN, CPHQ and
Courtney Breault, RN, MS*

Closing

Christina Oldini, MBA, RN, CPHQ

Disclaimer

- The information shared in this webinar series and on our resource site serve as examples of how hospitals, healthcare workers, and families in California are responding to COVID-19. We understand that each hospital is working with a different set of resources and constraints. As such, some of the recommendations presented may not apply to your hospital setting. Guidelines and recommendations should be adapted to fit your local needs.
- As this is a rapidly evolving public health situation, we encourage you to consider the most recently available local health department and CDC guidance when developing your internal protocols.

COVID-19 Resource Site

www.CAperinatalprograms.org



The screenshot shows the header of the website with the CPQCC logo (California Perinatal Quality Care Collaborative) on the left and the CMQCC logo (California Maternal Quality Care Collaborative) on the right. Below the logos is the main heading "COVID-19 Resources for Maternal and Infant Health" in blue. The text below the heading states: "The safety and well-being of the healthcare workers, patients, and communities of California hospitals is our top priority. We have aggregated the following resources about COVID-19 in maternal and infant health to help hospitals and healthcare workers respond to the situation as it unfolds." It continues: "The webinars and sample hospital resources shared on this website serve as examples of how individual hospitals in California are preparing their perinatal units to respond to COVID-19. We understand that each hospital is working with a different set of resources and constraints. Some of the recommendations presented may not be directly applicable to your hospital setting. Guidelines should be adapted to fit your local needs." Below this is the date "Last Updated: Aug 18, 2020 @ 3:35 pm PDT". At the bottom, there are two columns of links: "Important Updates" (CPQCC/ CMQCC Webinars, Sample Hospital Resources, Organizational Recommendations, Caregiver Support Resources) and "Patient Resources" (Key Data Sources for California, Data Registries, About Us).

- The slides and webinar recording will be made available on our resources site later today. Due to the rapidly changing guidelines around COVID-19, they may be taken down after two weeks.
- For more information email: info@CAperinatalprograms.org

Important Updates for CA Hospitals

- As of 8/7/20, the California Department of Public Health recommends that one support person be allowed to be present with labor and delivery patients. CDPH also recommends that a doula, if used, be permitted to be present if prior arrangements have been made with the hospital and the doula complies with hospital PPE and infection control guidelines. (CDPH AFL 20-38.4)
- As of 8/7/20, the California Department of Public Health reaffirmed its earlier recommendation that NICU and PICU patients be allowed two designated support persons that may visit at the same time. (CDPH AFL 20-38.4)

CPQCC/ CMQCC Webinars

- **NEW** Supporting Your Perinatal Units During COVID-19: Health Equity for California Latinx Communities (9/29/20, 12:00 PM PDT) | **REGISTER**
- **UPDATED** Supporting Your Perinatal Units During COVID-19: *Breastfeeding Guidance* (Stanford/CA Breastfeeding Coalition, 9/10/20) | **Webinar Recording and Slides** | Resources: Parent's Guide to Shared-Decision Making on Breastfeeding During COVID-19 – **English, Spanish**
- Supporting Your Perinatal Units During COVID-19: *Evolving Guidance* (Sutter Health, Memorial Medical Center/UCSD/NorthBay Healthcare, 8/21/20) | **Webinar Recording and Slides** | Resources: **Sutter Health COVID-19 Perinatal Care Management, COVID-19 Frequently Asked Questions, OB Screening/Testing Algorithm**
- Supporting Your Perinatal Units During COVID-19: *Outpatient Care and Patient Education* (Multidisciplinary Panel, 5/15/20) | **Webinar Recording and Slides**
- Supporting Your Perinatal Units During COVID-19: *Mental Health Considerations for Patients and Healthcare Workers*. (UCSF/ NEC Society/ Stanford, 4/29/20) | **Webinar Recording and Slides**

**Please Note: Due to the rapidly changing guidelines around COVID-19, older webinar recordings were taken down.*

Sample Hospital Resources

The resources below were shared by individual hospitals as examples of their policies during COVID-19. They may not reflect the most up-to-date policies being used by these hospitals but are continually reviewed for accuracy and relevance.

Screening/Testing

- [Steps to Evaluating a Patient with Respiratory Symptoms](#) (Zuckerberg San Francisco General, 5/26/20)
- [Admission Testing and Management for L&D and Postpartum](#) (UCLA, 4/28/20)
- [L&D Asymptomatic Patient Rapid COVID-19 Testing Algorithm](#) (Stanford Health Care, 4/22/20)
- [L&D Pre-Procedure COVID-19 Testing Algorithm](#) (Stanford Health Care, 4/22/20)
- [How to Obtain a Nasopharyngeal Swab](#) (The New England Journal of Medicine, 4/17/20)

Surgical

- [Code C COVID Scenario Storyboard](#) (UC Davis, 5/19/20)
- [L&D OR Algorithm](#) (UCLA, 4/28/20)
- [L&D Emergency OR Algorithm](#) (UCLA, 4/28/20)

COVID+ or PUI General Care

- [UPDATED Example of a Frequently Updated Policy](#) (CPMC, 8/25/20)
- [L&D COVID-19 Patient Care Algorithm](#) (Stanford Health Care, 8/5/20)
- [Prone Positioning for Pregnant Women With Hypoxemia Due to Coronavirus Disease 2019, Demonstration Vid](#) (8/20)
- [COVID-19 Coding Decision Tree](#) (Stanford Health Care, 4/14/20)
- [Care of Neonates Born to Women with Suspected/Confirmed SARS-CoV-2](#) (UC Davis Health, 4/10/20)
- [Neonatal Respiratory Filter Examples](#) (LAC-USC and Stanford Health Care, 3/25/20)

Organizational Recommendations

American Academy of Pediatrics

- [UPDATED Management of Infants Born to Mothers with COVID-19](#) (9/10/20)

American College of Obstetricians and Gynecologists

- [UPDATED FAQ for Obstetrician-Gynecologists, Obstetrics](#) (9/10/20)
- [Patient FAQ](#) (8/12/20)
- [Practice Advisory](#) (8/12/20)
- [Outpatient Assessment and Management Algorithm](#) (ACOG/ SMFM, 7/14/20)
- [Resumption of Comprehensive Women's Health Care](#) (5/6/20)
- [Early Acute Respiratory Support for Pregnant Patients with Coronavirus Disease 2019](#) (5/6/20)
- [Simulation Guide](#) (4/20/20)

Centers for Disease Control and Prevention

- [NEW Characteristics and Maternal and Birth Outcomes of Hospitalized Pregnant Women with Laboratory-Confirmed COVID-19](#) (9/16/20)
- [UPDATED Information on Pregnancy & Breastfeeding](#) (9/11/20)
- [Evaluation & Management Considerations for Neonates at Risk of COVID-19](#) (8/3/20)
- [Interim Considerations for Infection Prevention and Control in Inpatient Obstetric Healthcare Settings](#) (5/20/20)

Society for Maternal-Fetal Medicine

- [What Maternal-Fetal Medicine Subspecialists Need to Know](#) (7/23/20)
- [Outpatient Assessment and Management Algorithm](#) (ACOG/SMFM, 7/14/20)
- [SMFM Management Considerations for Pregnant Patients with COVID-19](#) (7/2/20)
- [Strategies to Provide Equitable Care During COVID-19](#) (5/28/20)

Additional Resources

- [UPDATED Interim Considerations for Obstetric Anesthesia Care Related to COVID](#) (Society for Obstetric Anesthesia and Perinatology, 9/10/20)
- [Visitor Limitations Guidance \(including L&D & NICU\)](#) (CA Department of Public Health, 8/7/20)
- [Neonatal COVID19 Repository](#) (Dr. K.S.Gautham, Texas Children's Hospital/Baylor College of Medicine, 7/19/20)
- [Guidance for Pregnant and Breastfeeding Women During the COVID-19 Pandemic](#) [English Version](#) / [Spanish Version](#) (California Department of Public Health, 5/13/20)
- [Milk Handling for COVID-19](#) (Human Milk Banking Association, 4/14/20)
- [Interim Guidance for Basic and Advanced Life Support in Adults, Children, and Neonates with COVID-19](#) (American Heart Association, 4/9/20)
- [Doula and COVID-19](#) (DONA International, 3/12/20)



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All Stanford Accredited CME on COVID-19
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