Contact between Registered Midwife and Client:

Before every interaction with a client, the Registered Midwife (RM) will contact the client prior to seeing them in person, to screen:

- Have you experienced any: fever, cough, sore throat, trouble breathing, or additional respiratory symptoms, achy muscles, or fatigue?
- In the last 14 days did you:
  - Travel to anywhere outside of Canada;
  - Have close contact with: a confirmed or probable case of COVID-19 within 14 days; a person with acute respiratory illness who has travelled anywhere outside of Canada in the 14 days; have laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19 virus within 14 days;
  - Are you self-isolating?

Link to testing and self-isolation criteria: https://www.albertahealthservices.ca/assets/info/ppih/if/ppih-ncov-case-def.pdf

Screen others in household. If others are self-isolating (symptomatic or asymptomatic), RM requires PPE, and they should not be in the same room with the RM. If someone in the household is symptomatic, recommend birth in another location (e.g. hospital) or that symptomatic person is not staying at the home.

For home births, some facilities or jurisdictions have asked for notification of any home births to assist with emergency response planning. Please be familiar with the communication expectations where you have privileges.

Any client with a confirmed COVID-19 case requires an OB consultation, and ultrasound with Doppler every 4 weeks.

**Midwifery Pathway – Intrapartum Care**

**Intrapartum client**

Screen for COVID-19 risk

**Client screens positive**

Midwife and support person must wear PPE

Direct client to self-isolate due to risk

**Client screens negative**

Midwife to request that client screens support person, and that they are not present for visit if positive or risks

**Symptomatic**

Midwife assesses severity of symptoms (as outlined by AHS):
- Shortness of breath
- Difficulty speaking without gasping or during walking
- Coughing blood >1 tsp
- Pain/pressure in chest (other than coughing)
- Vomiting
- Signs of dehydration/dizziness when standing
- Less responsive/confusion

Are symptoms severe?

- Severe symptoms
  - Direct client to call 911
  - Ask partner/support person to inform RM of which hospital the client is going to
  - Call the OB on-call to give a report and request transfer of care
  - Proceed to inpatient algorithm

- Mild symptoms
  - Advise client to self-isolate and wait for RM to direct them to an L&D site
  - If appropriate, contact RAAPID to determine site for Patient admission
  - Advise patient to travel to site only via personal vehicle or EMS if unable to transport self safely
  - As appropriate, RM will continue to provide ongoing care in hospital, in consultation with OB, and/or receive the baby

**Asymptomatic**

Proceed with intrapartum care as planned, appropriate PPE procedures to be followed

If symptoms develop, move to symptomatic pathway

Continue routine care

If appropriate, contact RAAPID to determine site for Patient admission

Inform client that if any symptoms develop in PP period (maternal or newborn), contact 811 and midwife

Continue routine care with contact/droplet PPE

Inform hospital of planned home birth with asymptomatic client in self-isolation

**Screen others in household. Others in house who are self-isolated should not be present with RM**

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