

**COVID-19 Pandemic Visitation in Maternal Child Health (MCH) Inpatient Units**  
(Labor and Delivery, OB triage, Post-Partum, Inpatient Pediatrics, Pediatric Intensive Care and Neonatal Intensive Care)

Date written: March 2020

Revision Date: 7/22/2020

Approved by: Lisa Derr, Roald Helgesen, Matt Hirschfeld, Jacob Gray

**Purpose:** Define visitation in MCH during COVID-19 pandemic to protect the health of patients, visitors, and staff.

**Visitor is defined:** as Parent, Labor Support, Legal Guardian, Adoptive Parent, Foster Parent, or Doula

**1. All visitors staying overnight will agree to the following:**

- 1.1. To be screened according to the current CDC recommendations upon arrival to the hospital and any other key check points. (See COVID-19 Screening protocol for entrance to Maternal Child Health 7.22.2020) Screening includes the following questions: Do you have a fever, cough, shortness of breath, symptoms of a common cold, new loss of taste, new loss of smell, new onset diarrhea?
- 1.2. Perform proper hand hygiene upon arrival to the hospital and patient's room and frequently throughout their stay
- 1.3. Refrain from visiting if experiencing any signs/symptoms of COVID-19
- 1.4. May enter and exit the hospital as necessary during the patient's hospital stay
- 1.5. The support is instructed to physically distance from others while continuing to wear a mask at all times
  - 1.5.1. The admitted inpatient is not permitted to leave the unit

**2. OB Triage**

- 2.1. No visitors allowed in OB triage, only the patient is authorized until she is admitted for labor and then her labor support person will be allowed in.

**3. Labor and Delivery, Antepartum & Post-Partum**

- 3.1. One labor support person during inpatient stay (must be 18 or older, unless a parent of expected newborn).
  - 3.1.1. Providers may allow a patient to go outside periodically during an extended antepartum stay, but this will be determined on a case by case basis
- 3.2. Leaving the unit for the purpose of Covid-19 testing is separate from the one time allowance to leave the hospital
- 3.3. A certified Doula is allowed in addition to the one labor support. Upon request, the Doula will need to be able to provide proof of a professional client relationship such as a business card, contract or proof of formal training
- 3.4. Under certain circumstances, labor support person may be changed, after discussing with unit leadership and/or inpatient medical provider
- 3.5. At discharge, if patient has arrangements to stay in Patient Housing, the labor support person may stay with the patient. The support must be able to pass a background check. All Patient Housing guests must abide by all rules and regulations in Patient Housing or room may be forfeited.
- 3.6. All visitors in Patient Housing are expected to wear a mask when outside of Patient Housing room, maintain social distancing and self-monitor for signs/symptoms of COVID-19.

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**4. Inpatient Pediatrics, PICU and NICU**

- 4.1 Both parents may visit the child at the same time
- 4.2 Legal Guardian may be substituted for a parent

**5. POSITIVE COVID-19 or PUI patient visitation guidelines:**

- 5.1. All other visitation rules apply except the following  
Only **one visitor** is allowed in the room with a COVID positive or PUI patient and **must** stay in room at all times.
- 5.2 Visitor must wear mask and eye protection at all times while in the hospital.

**6. Parents in Patient Housing**

- 6.1. Local parents will be offered rooms only when rooms are available when patient is in peds, NIUC, or PICU and there is no room to stay in with the patient in the hospital
- 6.2. A housing request form must be submitted to obtain a room for this parent.
- 6.3. Parents must abide by all rules and regulations in Patient Housing or room may be forfeited.

**7. Relinquishment (adoption):**

- 7.1. If birth mother *does not* desire for the infant to be in room with her, adoptive/foster parent(s) may come for the duration of the infant's hospitalization and stay in a separate post-partum room with the newborn.
- 7.2. If birth mother desires for the infant to be in the post-partum room with her until the day of relinquishment, the adoptive parent(s) is permitted to come in on the day of discharge for discharge instructions.
- 7.3. Instruct adoptive/foster parent(s) to enter through the Emergency Department for clearance  
Adoptive/foster parent(s) will require screening for COVID-19.

**8. OCS consultations:**

- 8.1. OCS staff must wear a cloth mask at all times.
- 8.2. OCS staff will coordinate with inpatient social worker (SW) to obtain information about the case and to arrange a phone or Vidyo meeting with parent(s) and/or family when possible.
- 8.3. SW will escort the OCS worker on the unit when an in person visit is necessary.
- 8.4. OCS will communicate with charge RN and SW to send appropriate paperwork related to any cases of assuming custody.
- 8.5. If foster care is needed, a foster parent will be identified and will be allowed into the unit after screening on the day of discharge.
- 8.6. Foster parent will not require swabbing for COVID-19 unless staying overnight.
- 8.7. Foster parent should enter through the ED entrance for clearance.
- 8.8. OCS will not be allowed into a room of a PUI or positive COVID.

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9. **Expressed Breast Milk** should be taken directly to the NICU for drop off by parent.

10. **Special Circumstances :**

- 10.1. While we are minimizing any additional exposures as much as possible, visitation exceptions *may* be made by leadership for the following circumstances:
- 10.2. Visitation of a patient nearing at the end of life
- 10.3. Patient who is experiencing a fetal demise
- 10.4. Other significant extenuating circumstances will be discussed with both the Medical Provider and a member of the leadership team for patients **without** COVID-19