

Current awareness for Midwifery

Recent guidelines, reports and articles

April 2020

Guidelines related to Covid-19

Clinical guide for the temporary reorganisation of intrapartum maternity care during the coronavirus pandemic

NHS England and NHS Improvement; 2020.

<https://www.england.nhs.uk/coronavirus/wp-content/uploads/sites/52/2020/04/C0241-specialty-guide-intrapartum-maternity-care-9-april-2020.pdf>

9 April, Version 1

Freely available online

Coronavirus (COVID-19) infection and pregnancy. Updated Version 8

Royal College of Obstetricians and Gynaecologists (RCOG); 2020.

<https://www.rcog.org.uk/coronavirus-pregnancy>

Version 8: updated Friday 17 April 2020.

Guidance for healthcare professionals on coronavirus (COVID-19) infection in pregnancy, published by the RCOG, Royal College of Midwives, Royal College of Paediatrics and Child Health, Public Health England and Public Health Scotland.

Freely available online

Coronavirus (COVID-19): Advice for people at higher risk.

NHS.uk; 2020.

<https://www.nhs.uk/conditions/coronavirus-covid-19/advice-for-people-at-high-risk/>

General information for those at higher risk of becoming very ill if they catch Covid-19.

Freely available online

COVID-19 - guidance for neonatal settings

British Association of Perinatal Medicine (BAPM); 2020.

<https://www.rcpch.ac.uk/resources/covid-19-guidance-neonatal-settings>

(Last modified 21 April 2020)

This page provides guidance for neonatal settings. It has been produced with the British Association of Perinatal Medicine (BAPM).

Updates in this version:

<https://www.rcpch.ac.uk/resources/covid-19-guidance-neonatal-settings#latest-updates-to-this-page>

Freely available online

COVID-19 - guidance for paediatric services

Royal College of Paediatrics and Child Health (RCPCH); 2020.

<https://www.rcpch.ac.uk/resources/covid-19-guidance-paediatric-services>

Last modified 6 April 2020

Updates in this version (published 6 April)

Working in neonatal settings: Section re-ordered and information updated.

Tonsillar examination: information removed from clinical recommendations section

Occupational health: guidance from PHE for occupational health and staff deployment, guidance for healthcare workers or patients exposed to COVID-19

Working in community paediatrics: letter regarding the use of Do Not Attempt Cardiopulmonary Resuscitation.

COVID-19: management in obstetric and gynecological settings

International Society of Ultrasound in Obstetrics and Gynecology (ISUOG); 2020.

[https://obgyn.onlinelibrary.wiley.com/doi/toc/10.1002/\(ISSN\)1469-0705.covid-19_in_obgyn](https://obgyn.onlinelibrary.wiley.com/doi/toc/10.1002/(ISSN)1469-0705.covid-19_in_obgyn)

There are concerns relating to the impact of SARS-CoV-2 infection on pregnant women and their fetuses, and patient management in the context of COVID-19 poses a challenge. This Virtual Issue compiles the latest research, guidance and opinions published in Ultrasound in Obstetrics and Gynecology on COVID-19 ... including management of infected pregnant women, rationalization of ultrasound services and risk mitigation for both patients and practitioners during the current pandemic.

Freely available online

Global Interim Guidance on Coronavirus Disease 2019 (COVID-19) During Pregnancy and Puerperium From FIGO and Allied Partners: Information for Healthcare Professionals

The International Federation of Gynecology and Obstetrics (FIGO); 2020.

<https://obgyn.onlinelibrary.wiley.com/doi/epdf/10.1002/ijgo.13156>

FIGO has issued the following guidance for the management of pregnant women at the four main settings of pregnancy: (1) ambulatory antenatal care in the outpatient clinics; (2) management in the setting of the obstetrical triage; (3) intrapartum management; and (4) postpartum management and neonatal care. We also provide guidance on the medical treatment of pregnant women with COVID-19 infection.

Freely available online

Guidance for antenatal and postnatal services in the evolving coronavirus (COVID-19) pandemic

Royal College of Obstetricians and Gynaecologists (RCOG); 2020.

<https://www.rcog.org.uk/globalassets/documents/guidelines/2020-03-30-guidance-for-antenatal-and-postnatal-services-in-the-evolving-coronavirus-covid-19-pandemic-20200331.pdf>

Guidance for antenatal screening and ultrasound in pregnancy in the evolving coronavirus (COVID-19) pandemic

Royal College of Obstetricians and Gynaecologists (RCOG); 2020.

<https://www.rcog.org.uk/globalassets/documents/guidelines/2020-03-25-covid19-antenatal-screening.pdf>

Freely available online

Guidance for fetal medicine units (FMUs) in the evolving coronavirus (COVID-19) pandemic

Royal College of Obstetricians and Gynaecologists (RCOG); 2020.

<https://www.rcog.org.uk/globalassets/documents/guidelines/2020-03-25-covid19-fetal-medicine.pdf>

Freely available online

Guidance for maternal medicine in the evolving coronavirus (COVID-19) pandemic

Royal College of Obstetricians and Gynaecologists (RCOG); 2020.

<https://www.rcog.org.uk/globalassets/documents/guidelines/2020-03-30-guidance-for-maternal-medicine-in-the-evolving-coronavirus-covid-19-pandemic.pdf>

Version 1: Published Monday 30 March 2020

This guidance has been written to provide specific recommendations during the COVID-19 pandemic on Ideas for adaptation of maternal medicine services to safely reduce face-to-face contact during the evolving coronavirus pandemic, for example by offering virtual consultations where appropriate, ensuring women are seen in one-stop clinics that cover all medical and obstetric needs in the same visit, avoiding unnecessary hospital admissions

Freely available online

ISIDOG Recommendations Concerning COVID-19 and Pregnancy

International Society of Infectious Disease in Obstetrics and Gynecology (ISIDOG); 2020.

<https://www.mdpi.com/2075-4418/10/4/243>

... we aim to provide detailed information on how to diagnose and manage pregnant women living in a pandemic of COVID-19. Pregnant women need to be considered as a high-risk population for COVID-19 infection, and if suspected or proven to be infected with the virus, they require special care in order to improve their survival rate and the well-being of their babies. Both protection of healthcare workers in such specific care situations and maximal protection of mother and child are envisioned.

Freely available online

ISUOG Safety Committee Position Statement: safe performance of obstetric and gynecological scans and equipment cleaning in the context of COVID-19

Poon L C. *Ultrasound in Obstetrics & Gynecology* 2020;;<https://doi.org/10.1002/uog.22027>.

In view of the challenges of the current coronavirus (COVID-19) pandemic and to protect both patients and ultrasound providers (physicians, sonographers, allied professionals), the International Society of Ultrasound in Obstetrics and Gynecology (ISUOG) has compiled the following expert-opinion-based guidance for the performance of ultrasound investigations in pregnancy and for gynecological indications.

Freely available online

Management of pregnant women with known or suspected COVID-19

Faculty of Intensive Care Medicine; 2020.

<https://icmanaesthesiacovid-19.org/management-of-pregnant-women-with-known-or-suspected-covid-19>

Commissioned from the Obstetric Anaesthetists' Association (OAA) by the Faculty of Intensive Care Medicine, the Intensive Care Society, the Association of Anaesthetists and the Royal College of Anaesthetists. It reflects the expert opinion of senior clinicians and is based in part on published information from the current and previous coronavirus outbreaks. It is correct at the time of publication but please be aware that it is subject to change as new information becomes available.

Freely available online

P200 Coronavirus (COVID-19) Search Pack.

Royal College of Midwives (RCM); 2020.

<https://www.rcm.org.uk/news-views/news/2020/april/p200-coronavirus-covid-19-search-pack-free-to-midwives-students-and-msws/>

This important new literature search pack from MIDIRS includes records on all aspects of the Coronavirus (COVID-19) in pregnancy, labour and the postnatal period and also includes risk of transmission to the infant, and provision of maternal health services. Free to midwives, students and MSWs, updated on a weekly basis.

Freely available online

Saving babies' lives care bundle Version 2: COVID-19 information.

NHS England; 2020.

<https://www.england.nhs.uk/publication/saving-babies-lives-care-bundle-version-2-covid-19-information/>

This guidance is an advisory document for maternity services, designed to advise healthcare providers on how to mitigate risk when adjusting provision of services, and recognising the evidence-based guidance of both the RCOG Guideline 31 and Saving Babies' Lives Care Bundle.

Freely available online

Articles related to Covid-19

An Uncomplicated Delivery in a Patient with Covid-19 in the United States

Iqbal S. *New England Journal of Medicine* 2020;;DOI: 10.1056/NEJMc2007605.

This case describes uncomplicated labor and vaginal delivery in a woman with symptomatic Covid-19. Staff wore appropriate PPE. There was no evidence of neonatal or intraamniotic infection. After delivery, the neonate was moved to a separate room until discharge. The neonate was nourished with formula and expressed breast milk. Telephone follow-up after delivery indicated there were no signs of neonatal infection. 7 days after the delivery, no caregivers appeared to be infected.

Freely available online

Clinical analysis of pregnant women with 2019 novel coronavirus pneumonia.

Chen S. *Journal of Medical Virology* 2020;;<https://doi.org/10.1002/jmv.25789>.

...Their primary initial manifestations were merely low-grade postpartum fever or mild respiratory symptoms. Therefore, the protective measures are necessary on admission; the instant CT scan and real-time reverse-transcriptase polymerase-chain-reaction (RT-PCR) assay should be helpful in early diagnosis and avoid cross-infection

on the occasion that patients have fever and other respiratory signs.

Clinical characteristics of pregnant women with Covid-19 in Wuhan, China

Chen L. *New England Journal of Medicine* 2020;:DOI: 10.1056/NEJMc2009226.

118 pregnant women represented 0.24% of all reported patients with Covid-19 at hospitals. 92% had mild disease. 8% had hypoxemia, compared to 15.7% in the general population with Covid-19. Severe disease developed in 6 of the 9 women after delivery. The exacerbations of respiratory disease that observed during the postpartum period could relate to pathophysiological changes. In contrast with flu, Covid-19 does not appear to give an increased risk of severe disease among pregnant women.

Freely available online

Clinical features and obstetric and neonatal outcomes of pregnant patients with COVID-19 in Wuhan, China: a retrospective, single-centre, descriptive study

Lancet 2020;:online ahead of print.

Interpretation: The maternal, fetal, and neonatal outcomes of patients who were infected in late pregnancy appeared very good, and these outcomes were achieved with intensive, active management that might be the best practice in the absence of more robust data. The clinical characteristics of these patients with COVID-19 during pregnancy were similar to those of non-pregnant adults with COVID-19 that have been reported in the literature.

Freely available online

Experience of Clinical Management for Pregnant Women and Newborns with Novel Coronavirus Pneumonia in Tongji Hospital, China.

Wang S. *Current Medical Science* 2020;:https://doi.org/10.1007/s11596-020-2174-4.

This article focused on the issues of concern of pregnant women including severe acute coronavirus 2 (SARS-CoV-2) infection diagnostic criteria, inspection precautions, drug treatment options, indications and methods of termination of pregnancy, postpartum fever, breastfeeding considerations, mode of mother-to-child transmission, neonatal isolation and advice on neonatal nursing, to provide valuable experience for better management of SARS-CoV-2 infection in pregnant women and newborns]

How to perform lung ultrasound in pregnant women with suspected COVID-19 infection

Moro F. *Ultrasound in Obstetrics & Gynecology* 2020;:https://doi.org/10.1002/uog.22028.

This article proposes a practical approach for obstetricians/gynecologists to perform lung ultrasound, showing potential applications, semiology and practical aspects, which should be of particular importance in emergency situations, such as the current pandemic infection of COVID-19.

Freely available online

Maternal health care management during the outbreak of coronavirus disease 2019 (COVID-19)

Chen Y. *Journal of Medical Virology* 2020;:doi: 10.1002/jmv.25787.

This article demonstrates the managed process of three pregnant women who presented fever after admitted to gynecology or obstetrics department.

Freely available online

Safe Delivery for COVID-19 Infected Pregnancies

BJOG: An International Journal of Obstetrics and Gynaecology 2020;:online ahead of print.

... Once a maternal infection of COVID-19 is suspected or confirmed, childbirth becomes complicated and challenging. Efficient obstetric treatment is required, and is key to optimizing the prognosis for both mother and child. Care should be taken in determination of the timing of delivery, assessment of the indications for caesarean section, preparation of the delivery room to prevent infection, choice of the type of anesthesia, and newborn management.

Freely available online

Understanding the coronavirus. [Comment]

Duncan D. *British Journal of Midwifery* 2020;28(3):146-148.

The novel coronavirus is yet to reach 'pandemic' status, but as it continues to spread, what do midwives need to know about it? Since January 2020, news of the coronavirus outbreak in Wuhan, China has made headlines around the world (Reynolds, 2020). However, how many of us fully understand what the virus is and what the implications

are for women and their families in our care?

Available with an NHS OpenAthens password for eligible users

Universal Screening for SARS-CoV-2 in Women Admitted for Delivery

Sutton D. *New England Journal of Medicine* 2020;;DOI: 10.1056/NEJMc2009316.

Following experience of two initially asymptomatic women in whom symptoms developed and who tested positive for SARS-CoV-2 after delivery the hospital implemented universal screening in women admitted for delivery. Over two weeks 33 out of 215 women tested positive, of whom 29 had no symptoms at presentation. Fever developed in 10% before postpartum discharge. This underscores the risk of Covid-19 amongst asymptomatic obstetric patients. Universal testing allows isolation planning and PPE use.

Freely available online

Guidelines

The following new guidance has recently been published:

Fertility care and emotional wellbeing.

Royal College of Nursing (RCN); 2020.

<https://www.rcn.org.uk/professional-development/publications/pub-007770>

This guidance has been developed as a resource for all health care professionals in all areas of fertility care and acknowledges the differences between emotional support and wellbeing, implications counselling and therapeutic counselling. The HFEA has supported the publication of this title.

Freely available online

Reports

The following report(s) may be of interest:

East Kent Hospitals maternity services: HSIB summary report

Healthcare Safety Investigation Branch; 2020.

https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/878434/HSIB_East_Kent_report.pdf

The Healthcare Safety Investigation Branch (HSIB) summary report provides an overview of:

the referrals caseload under the maternity investigations programme for East Kent Hospitals University NHS Foundation Trust (EKHUFT)

the themes which were identified as indicative of patient safety risk to mothers and babies

the engagement and escalation process that HSIB undertook with the trust and the wider system in response

Freely available online

Flour Fortification with Folic Acid.

Royal College of Nursing (RCN); 2020.

<https://www.rcn.org.uk/professional-development/publications/pub-009111>

Evidence suggests that fortifying flour with folic acid can help to support the prevention of neural tube defects. This publication outlines the RCN's position on the fortification of flour with folic acid.

Freely available online

Articles

The following journal articles are available from the Library and Knowledge Service electronically or in print. Please follow links to access full text online, contact me to order copies, or call into the library.

Biologicals in atopic disease in pregnancy: an EAACI position paper.

Pfaller B. *Allergy* 2020;;doi: 10.1111/all.14282.

This position paper integrates available data on safety of biologicals during pregnancy in atopic diseases via a systematic review with a detailed review on immunological considerations how inhibition of different pathways may impact pregnancy.

Available with an NHS OpenAthens password for eligible users

Breaking the silence.

Binnie C. *British Journal of Midwifery* 2020;28(3):144-145.

The death of a baby is one of the most profoundly traumatic experiences a family can experience. Chris Binnie from Beyond Bea Charity discusses why accepting support is better than being silent.

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Designing and implementing an all Wales postpartum haemorrhage quality improvement project: OBS Cymru (the Obstetric Bleeding Strategy for Wales).

Bell SF. *BMJ Open Quality* 2020;9(2):doi: 10.1136/bmjog-2019-000854.

Conclusions: A high level of project awareness across Welsh maternity units has been achieved. Measurement of blood loss was reported to be the most important early change in practice, while postpartum haemorrhage documentation and point-of-care (POC) testing continue to be embedded. Combining qualitative and quantitative measures to inform implementation has improved project delivery and allowed teams to adapt to local contexts.

Dietary guideline adherence during preconception and pregnancy: A systematic review.

Caut C. *Maternal and Child Nutrition* 2020;16(2):e12916.

The findings of this review suggest that preconceptual and pregnant women may not be meeting the minimum requirements stipulated in dietary guidelines and/or nutritional recommendations. This could have potential adverse consequences for pregnancy and birth outcomes and the health of the offspring. Major knowledge gaps identified in this review, which warrant further investigation, are the dietary intakes of men during preconception, and the predictors of guideline adherence.

Freely available online

Gestational diabetes and ethics.

Winter G. *British Journal of Midwifery* 2020;28(4):214–215.

With cases of gestational diabetes on the rise due to the increase in obesity rates, the author reveals the importance of screening and diagnosis. According to the National Institute for Health and Care Excellence around 700 000 women give birth in England and Wales annually; up to 5% of these women have either pre-existing diabetes or gestational diabetes mellitus; and the incidence of GDM is rising because of higher obesity rates in the general population and more pregnancies in older women.

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Heated humidified high-flow nasal cannula for preterm infants: an updated systematic review and meta-analysis.

Fleeman N. *International Journal of Technology Assessment in Health Care* 2019;35(5):298-306.

HHFNC may offer an efficacious and safe alternative to NCPAP for some infants but evidence is lacking for preterm infants with GA <= 28 weeks.

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Induction of labour—the debate.

Spillane E. *British Journal of Midwifery* 2020;28(3):142-143.

Induction of labour is currently a topical issue in midwifery. This month, I am risking controversy by discussing my thoughts on the debate over increasing induction of labour. Over the past two years, I have noted in my clinical setting a reduction in the number of births in the midwifery led setting. I have often tried to understand this phenomenon, particularly with what actually feels like much higher rates of activity within the maternity unit.

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Terminology review: changing culture to reduce risk.

Nurmahi C. *British Journal of Midwifery* 2020;28(4):218-219.

The author clarifies the distinction between the terms Syntocinon® and Syntometrine® in order to avoid confusion in clinical practice. Oxytocin (Syntocinon®) and ergometrine with oxytocin (Syntometrine®) are two well-known brands of oxytocics in current use in maternity centres within the UK. A recent incident alerted staff at University Hospital Southampton ([UHS], 2018) to the risks associated with the terminology being used to refer to these drugs.

Available with an NHS OpenAthens password for eligible users

Sustained Inflation vs Standard Resuscitation for Preterm Infants: A Systematic Review and Meta-analysis.

McMastAmerican Medical Associationer University; 2020.

<https://pubmed.ncbi.nlm.nih.gov/32011661/>

Conclusions and relevance: There was no difference in the risk of the primary outcome of death before hospital discharge, and there was no evidence of efficacy for sustained inflation to prevent secondary outcomes. These findings do not support the routine use of sustained inflation for preterm infants after birth.

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