



ಕರ್ನಾಟಕ ಸರ್ಕಾರ

ಆರೋಗ್ಯ ಮತ್ತು ಕುಟುಂಬ ಕಲ್ಯಾಣ ಸೇವೆಗಳ ನಿರ್ದೇಶನಾಲಯ
ಆನಂದರಾವ್ ವೃತ್ತ, ಬೆಂಗಳೂರು-560 009.

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**Guidelines for Providing Maternity Services in Karnataka State
Under the Prevailing Covid-19 Circumstances**

A. ANC services:

1. The linelisting of the ANCs in these areas should be obtained from RCH portal and should be categorized in to low risk and high risk ANCs
2. The low risk ANCs will be provided IFA, Calcium and Albendazole at the door step/AWW center/ Health Sub Center
3. The High risk ANCs should be mobilized to the nearest primary health center/ CHC/ GH for Antenatal check-up using the regular 108 ambulances (which are non- covid vehicles).
4. Each pregnant women to be linked with the appropriate health facility for delivery.
5. Ensure BEmONC and CEmONC service providers at appropriate facilities all the time.
6. All blood banks/ blood storage units need to be kept functional
7. All districts should identify and communicate to peripheral facilities a list of functional and staffed CEmONC centres where HRP and women who develop complications are to be shifted.
8. Containment, Hotspot and Cluster area-
 - a. The ASHA and ANM should maintain a linelist of ANCs likely to deliver in the next two weeks and screen them for Covid-19 at the nearest available facility for screening. The results of the test should be available at the time of availing delivery services.

B. Delivery Services:

1. All 24*7 Primary health centers and Non-FRU CHC & Taluka Hospitals in the state will provide basic emergency obstetric and newborn care such as –
Antenatal care, Normal delivery and Essential newborn care for- covid-19 negative pregnant women.

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2. All FRU CHC & Taluka hospitals will provide comprehensive emergency obstetric (including cesarean section) and new born care for all Covid-19 negative pregnant women
3. All district level hospitals including those attached to medical college shall continue to provide comprehensive emergency obstetric and new born care including cesarean section for all Covid-19 negative pregnant women. In case the district level hospital is designated for treatment covid-19 positive cases, another block in the hospital should be made available for providing maternity services for Covid-19 negative pregnancies.
4. In the eventuality of any Covid-19 suspected pregnant women requiring maternity services including ANC and delivery-

Definition: Suspected case

- A detailed travel history to hotspots, Clusters and Containment Zone
- History of contact with people who are covid-19 positive
- Symptoms of Covid-19: fever, difficulty in breathing, sore throat
- Coming from hotspot area, Clusters and Containment Zone
- Immunocompromised conditions
- Patient with SARI and ILI symptoms

- a. The respective district level hospital in the district should provide such services for suspected cases also with universal precautions.

All the hospitals where in delivery cases come from hotspot, Clusters and Containment Zones should take nasal/ throat swab from the pregnant women and send it to the mapped laboratories.

5. In the scenario of pregnant women willing to avail maternity services from private hospitals:
 - a. The private hospitals are duty bound to provide obstetric services including delivery
 - b. In the course of service provision should any case turn out to be covid-19 positive, then the hospital shall be closed for the purpose of disinfection and containment of the virus.
 - c. Needless to say that, the private hospitals should triage the cases into
 - i. Asymptomatic
 - ii. Symptomatic
 - iii. Refer the symptomatic cases (not tested) to the public hospitals treating suspect cases.
6. Covid-19 positive pregnant women requiring maternity services will avail such services from the following hospitals in the state-
 - a. In Bengaluru-Trauma centre in Victoria hospital and at 5th Floor of Bowring and Lady Curzon hospital
 - b. Rest of Karnataka- All designated covid-19 hospitals in respective districts
7. Majority of pregnant women deliver within 15 days of EDD. Hence, all pregnant women who come from hotspots, containment zones and cluster areas and who are likely to deliver in the next two weeks of due date should be tested even if asymptomatic.

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8. Asymptomatic pregnant women should be tested in the health facilities where they were expected to deliver and all arrangements should be made to collect and transfer samples to testing facilities. **Women should not be referred for lack of testing facility.**
9. The list of Laboratories which perform testing of Nasal/ Throat swabs is available with the District Surveillance officer (DSO) of the respective district. The administrative medical officer (AMO) of the hospital with the DSO for smooth testing.
10. The trained lab technicians / Staff Nurse should take the nasal/ throat swab from the pregnant women and send it to the concerned laboratory.

Please note:

- No health center nor hospital should decline the emergency maternity services to any of the pregnant women, subject to conditions mentioned above
- They shall be no discrimination on the basis of caste/ religion/ economic status

C. Postpartum care:

1. Ensure availability of IFA and calcium tablets during the PNC period.
2. In case of home deliveries, immediate visits to be made by concerned Medical officer to assess the health need of the women and newborn.

D. Family Planning and Safe Abortion services:

1. Contraceptives to be provided to eligible couples/ others needing them through all public health facilities, including sub health centers and by all ASHAs
2. Information about delayed availability of IUCDs and sterilization services until routine services resume should be displayed at all health facilities.
3. Beneficiaries must be counseled for adoption of temporary methods like condoms/ OCP/ injectables in the interim period.
4. Medical and Surgical abortion services to be ensured at appropriate facility level with appropriate infection prevention measures including counseling for post abortion care and provision of contraception.



Director
Health & Family Welfare Services