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Health Nexus Weekly Bulletin

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PRIMARY CARE DURING COVID-19 PANDEMIC

PREGNANCY CARE AND PRENATAL SCREENING



Should Primary Care for Pregnant Women Be Different during the COVID-19 Pandemic?

Despite prenatal care needing to continue, current public health guidelines on physical distancing may pose challenges for primary prenatal care providers to ensure that their clients/patients are receiving early and regular prenatal care. Here are some updates from Canadian maternal health associations:

The [*Society of Obstetricians and Gynecologists of Canada*](#) (2020) in its COVID-19 FAQ advised that:

- "Any reduction or alteration in antepartum care will need to be individualized according to the particular circumstances of the patient, the capacity of the health system, and access to virtual visits."
 - Some reduction in the frequency of visits for low-risk pregnancy care may be implemented (based on the recent literature).
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- Virtual visits and telephone support should be offered where appropriate.

The Centre for Effective Practice has developed the [COVID-19 Clinical and Practical Guidance for Primary Care Providers](#) that is updated daily with relevant resources and summary recommendations on maintaining practices for prenatal and postnatal care.

Among other resources, the tool provides a link to [Interim Schedule for Pregnant Women and Children During the COVID-19 Pandemic](#) (developed by St. Michael's Hospital, 2020) that proposes adjustments to routine low-risk prenatal visits using a mixed in-person and virtual care model. However, the guideline also emphasizes the importance of assessing clients on a case-by-case basis to determine appropriateness for an adjusted prenatal visit schedule and/or virtual care.

The [BC Centre for Disease Control](#) has developed a schedule for prenatal care during the COVID-19 pandemic, recommending to reduce the number of prenatal (virtual or in-person) visits for low-risk healthy pregnant individuals to eight. For high-risk pregnancies, an individualized care plan should be created. The complete guideline can be found here: <https://bit.ly/2XUaira>

[The Association of Ontario Midwives \(AOM\)](#) issued a reduced schedule of visits during the COVID-19 pandemic, that also recommends eight antenatal contacts, delivered by virtual means as much as possible. The recommendation for topics to be included in the virtual visit is as follows:

- Prenatal screening and/or ultrasound bookings
 - Informed choice discussions
 - Prescription orders
 - General questions related to pregnancy and birth.
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Postpartum community visits by primary care midwives may also be reduced due to the COVID-19 pandemic. [The Association of Ontario Midwives](#) suggests the following schedule (which may be adapted considering clinical circumstances and requirements for in-person assessment):

- Parent-infant dyad should be visited within the first 48 hours of birth (to offer newborn screening and feeding support).
- At least one more additional visit should be done in the first week.
- Additional visits, including the discharge from midwifery care, can be done virtually by phone or videoconference.

Prenatal screening in Ontario may also be affected by the COVID-19 pandemic. According to [Prenatal Screening Ontario](#):

- Some diagnostic imaging centres are not offering dating and nuchal translucency (NT) ultrasounds.
- Community blood collection services are being consolidated to a smaller number of labs.
- Pregnant individuals in self-isolation are missing the NT ultrasound window (and might not be able to have the prenatal screening done during their pregnancy).

However, Prenatal Screening Ontario (2020) states that for singleton pregnancies (one fetus), NT ultrasounds should be offered to all pregnant individuals as part of the enhanced First Trimester Screening (eFTS). If NT ultrasound is not available, comparable alternative Maternal Serum Screen (MSS) may be done in the second trimester of pregnancy (beginning at 14 weeks).

For twin pregnancies, nuchal translucency (NT) ultrasounds should be prioritized; but if it is not available, OHIP funded non-invasive prenatal testing (NIPT) can be ordered by any physician or nurse practitioner (effective April 6 until July 6,

2020). For pregnancies with triplets and other multiples, nuchal translucency (NT) ultrasounds currently remain the only screening option. For more detailed prenatal screening guidelines, prenatal screening requisitions, provider tools and FAQ questions (which can be shared with clients) visit *What You Need to Know About COVID-19 and Pregnancy* section at <https://bit.ly/3eHRZev>.

Additional resources:

Canadian Association of Midwives and National Aboriginal Council of Midwives: *Flexible Frameworks for Safe and Quality Midwifery Care during COVID-19. Recommendations for governments and health authorities.*

https://canadianmidwives.org/wp-content/uploads/2020/04/MaintainingQualityMidwiferyCareCOVID19_VFinalENG_20200417.pdf

Canadian Association of Midwives and National Aboriginal Council of Midwives: *Midwives as Essential Primary Care Providers in the Context of COVID-19.*

https://canadianmidwives.org/wp-content/uploads/2020/04/MidwivesEssentialProviders_EN_20190403_VF.pdf

UNICEF: *Navigating pregnancy during the coronavirus disease (COVID-19) pandemic.*

<https://www.unicef.org/coronavirus/navigating-pregnancy-during-coronavirus-disease-covid-19-pandemic>

College of Midwives of Ontario: *COVID-19 Frequently Asked Questions for Midwifery Clients.*

<https://www.cmo.on.ca/covid-19-frequently-asked-questions-for-clients/>

The Association of Ontario Midwives: *Virtual Visit Guide for Midwives.*

<https://www.ontariomidwives.ca/sites/default/files/Virtual%20Visit%20Guide%20for%20Midwives%20-%202020.pdf>

Society of Obstetricians and Gynecologists of Canada: *Urgent Update – Temporary Alternative Screening Strategy for Gestational Diabetes Screening during the COVID-19 Pandemic.*

<https://www.sogc.org/en/content/featured-news/Gestational-Diabetes-Screening-During-COVID-19-Pandemic.aspx>

References:

Centre for Effective Practice: *COVID-19 Clinical and Practical Guidance for Primary Care Providers.*

<https://tools.cep.health/tool/covid-19/>

Canadian Family Physicians: *Interim scheduling for pregnant women and children during the COVID-19 pandemic.*

<https://www.cfp.ca/news/2020/03/25/3-24>

Prenatal Screening Ontario: *What You Need to Know About COVID-19 and Pregnancy.*

https://prenatalscreeningontario.ca/en/ps0/What_you_Need_to_Know_About_COVID-19_and_Pregnancy.aspx#-Important-Prenatal-Screening-Service-Announcement-for-Health-Care-Providers-April-6-2020-

BC Centre for Disease Control: *Antenatal Visits during COVID-19 Pandemic.*

http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_AntenatalVisitsDuringPandemic.pdf

The Association of Ontario Midwives. *COVID-19: Reduced schedule of visits and*

use of PPE in midwifery April 06 2020.

<https://www.ontariomidwives.ca/sites/default/files/2020%2004%2006%20COVID19-Reduced%20schedule%20of%20visits%20and%20use%20of%20PPE.pdf>

Society of Obstetricians and Gynecologists of Canada: *Frequently Asked Questions for Managing Pregnant Patients in the COVID-19 Pandemic.*

<https://sogc.org/en/-COVID-19/COVID-19/en/content/COVID-19/COVID-19.aspx?hkey=dd7d7494-49fa-4966-ab4d-4dca362a9655>

NEWBORN AND WELL CHILD ROUTINE PRIMARY CARE



Due to the COVID-19 Pandemic, many families will experience changes to their

routine newborn and well child care.

In response to the [order](#) communicated on March 19, 2020, by the Chief Medical Officer of Health to Health Care Providers, many community primary care providers are transitioning to virtual visits or alternative levels of care to support children and families.

The order states that:

- All non-essential and elective services should be ceased or reduced to minimal levels, subject to allowable exceptions, until further notice.
- Clinicians are in the best position to determine what is essential in their specific health practice.

[Newborn screening](#) in Ontario is considered essential services and will continue to be performed according to guidelines.

In its interim [COVID-19 Operational Guidance for Maintaining Essential Health Services during an Outbreak](#), WHO has identified young infants as a high-priority population for the provision of essential health care.

Primary care newborn and well-child assessments play an important role in healthy child growth and development, and are currently accommodated on a case-by-case basis according to an individual family situation.

[Canadian Pediatric Society](#) shared an article with tools on providing virtual care during the COVID-19 pandemic that includes the recommendations for the paediatric providers on in-clinic and virtual visits, as well as strategies on how to prepare for an in-office visit during the COVID-19 pandemic.

[The interim schedule for pregnant women and children during the COVID-19 pandemic](#) developed by St. Michael's Hospital (2020) also suggests an alternative schedule for well-child visits, where visits that incorporate immunizations should be continued, and all other visits to be done virtually (or postponed if there are no concerns).

References:

Government of Ontario: *COVID-19 Directive #2 for Health Care Providers (Regulated Health Professionals or Persons who operate a Group Practice of Regulated Health Professionals)*.

http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/docs/directives/RHPA_professionals.pdf

Newborn Screening Ontario: *Newborn Screening Bulletin 2020-2*.

https://www.newbornscreening.on.ca/sites/default/files/bulletins/2020_-_2.pdf

Canadian Pediatric Society: *Providing virtual care during a pandemic: A guide to telemedicine in the paediatric office*.

<https://www.cps.ca/en/blog-bloque/virtual-care-during-a-pandemic>

WHO: *COVID-19 Operational Guidance for Maintaining Essential Health Services during an Outbreak*.

<https://www.who.int/publications-detail/covid-19-operational-guidance-for-maintaining-essential-health-services-during-an-outbreak>

IMMUNIZATIONS



April 24th to 30th is the [World Immunization Week 2020!](#)

According to [WHO](#) (2020), "immunization is a core health service that should be prioritized for the prevention of communicable diseases and safeguarded for continuity during the COVID-19 Pandemic, where feasible". Also, WHO states that providing immunizations may need to be adapted and should be conducted under safe conditions without harm to healthcare workers, caregivers, and the community.

[Canadian Paediatric Society](#) (2020) emphasizes that "routine immunizations for

children should be kept up-to-date because any delay or omission in scheduled vaccines puts children at risk for common and serious childhood infections, such as pneumococcal disease, measles, and pertussis". According to current recommendations, in-person vaccine visits may need to be reserved to accommodate young children's needs for routine immunizations (Canadian Paediatric Society, 2020).

It is recommended that families refer to their primary care providers for additional information about accommodations and scheduling of in-person vaccine visits.

Resources:

WHO/UNICEF: *Joint statement - Maintaining routine immunization services vital during the COVID-19 Pandemic.*

<http://www.euro.who.int/en/media-centre/events/events/2020/04/european-immunization-week-2020/statements/whounicef-joint-statement-maintaining-routine-immunization-services-vital-during-the-covid-19-pandemic>

References:

WHO: *Guiding principles for immunization activities during the COVID-19 pandemic.*

https://apps.who.int/iris/bitstream/handle/10665/331590/WHO-2019-nCoV-immunization_services-2020.1-eng.pdf

Canadian Pediatric Society: *Current epidemiology and guidance for COVID-10 caused by SARS-CoV-2 virus, in children: March 2020.*

<https://www.cps.ca/en/documents/position/current-epidemiology-and-guidance-for-covid-19-march-2020>

Visit [our resources page](#) to discover all our many evidence-based, up-to-date resources!



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