



MNCYN & LHSC COVID-19
Weekly Perinatal Regional
WebEx Update
Minutes



Date: Aug. 31 2020
1500-1530 hrs.

Moderator: Gwen Peterek (MNCYN)

Participants: Gwen Peterek (MNCYN), Anita Bunnie (MNCYN), Kristine Fraser (MNCYN), Leanne McArthur (MNCYN), Kelly Barzsa (Cambridge), Dr. K. Blaine (Stratford), Michelle Basacco (LHSC), Jocelyn Patton-Audette (Owen Sound), Tihana Antic (MOH), Mary Rae (Hanover), 2 callers on the phone.

Welcome: Gwen Peterek (MNCYN)

- Gwen facilitated the meeting today.

Item #1: Regional Update: COVID-19 Cases:

LOCATION	CASES	RECOVERED	DEATHS	OTHER STATS
LONDON-MIDDLESEX	730	655	57	2 new case
WINDSOR-ESSEX	2521	2368	72	
CHATHAM-KENT	362	353	2	
ST. THOMAS	254	237	5	
LAMBTON	338	311	25	
HURON-PERTH	116*	99*	5*	*Currently following Gov. ON guidelines and reporting only total cases, active cases and number of active long term care home outbreaks. Numbers may not be up-to-date. These numbers may not be an accurate reflection of recovered cases and deaths.
GREY-BRUCE	127	121	0	
THUNDER BAY				
MICHIGAN	102,017		6,473	
• DETROIT	13,625		1,511	
ONTARIO	42,309	38,277	2,811	49 in hospital 18 ICU 9 Vent
CANADA				

Item #1: MNCYN Update: (Gwen Peterek)

Update re: Infant Hearing Checks



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A couple of weeks ago we sent out an update from Ontario Health announcing additional funding to increase audiology capacity to screen infants impacted by the COVID-19 outbreak. The Ontario government is providing \$3.8 million to support hearing checks for infants who did not receive the universal newborn hearing screen due to the COVID-19 outbreak when Infant Hearing Program lead agencies suspended the newborn hearing screen programs. Infant Hearing Program lead agencies are now starting to safely resume in-person services. These additional funds mean that newborns who missed their hearing screening will now be able to be screened. Infant Hearing Program lead agencies will arrange a hearing check by an audiologist for babies who missed their newborn hearing screen.

- Contact the [Infant Hearing Program location](#) near you for more information.

Update Re: Anticipated Release of Revised COVID -19 Guidelines for Maternal Newborn Care

The PCMCH will soon be releasing an extensive list of recommendations regarding maternal / newborn care during COVID. This will be a much more comprehensive guideline than the guidelines that were quickly pulled together and published in the midst of COVID earlier this Spring. They anticipate approx. 64 recommendations and will likely provide a Webinar on it once released. We will keep you posted when we find out the guidelines have been published.

Also, Southern Ontario Obstetrical Network (SOON) from Toronto area conducted a survey of hospitals in the GTA looking at how many hospitals were following the current PCMCH guideline that COVID-19 should be suspected in all women manifesting a persistent (on two occasions, 30 minutes apart) fever of 37.8°C or greater in labour. At our last meeting Gwen Peterek had mentioned that although most hospitals were following this recommendation in the GTA they found that there were no patients in labour who had later tested positive for COVID based solely on an elevated temp. Therefore, the SOON group had suggested that this guideline might be causing unnecessary work if it is not detecting COVID in pregnancy.

They discussed the need to go back to IPAC to look at re-wording the guideline, recognizing that fever can be a sign of COVID if there are no other contributing factors for fever, but suggested that the patient should be evaluated by a physician for any other possible causes before using elevation in temperature as a criteria to classify a patient as suspect for COVID.

At our last meeting, Kerri Hannon (Stratford) confirmed that they had a case recently of a patient who had a temp. in labour but no other COVID symptoms. She was found to have an E.



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Coli infection but was swabbed also for COVID and found to be positive. On repeat swab to assess for a false positive, she proved to be positive again.

We have shared a description of this case with T. Antic (MOH) who was going to forward it to the PCMCH task force. Since then we have been sent the GTA survey and have been asked to disseminate it to the region. Ottawa region has also been asked to disseminate it. Gwen Peterek sent it out to all of the Nurse Managers of the Maternal Child units in our region to forward to their Chiefs of Obstetrics. Hopefully, your Chiefs have been able to complete it. The SOON group who will share the results of the survey with the Ministry Task Force to help inform best practice. Let us know if you have not received the survey and we can forward it to you.

Also at our last meeting we had a question from Stratford as to whether some hospitals are using intrapartum Nitrous Oxide during COVID. This question has also been raised in Goderich, Woodstock and Owen Sound. Owen Sound has the proper filter so has been using N2O for their non-COVID pts. It has depended somewhat on individual physicians as to whether they use it or not, but the organization never did restrict its use.

We also sent a summary of this discussion to T. Antic to share with the PCMCH COVID Guideline Task Force. It will be interesting to see what they decide about this since the science is not compelling that N2O is an AGMP but the issue is more around proper cleaning and the use of the proper filter in the line. There is some extensive information on this topic on the COVID FAQ section of the Ontario Midwives Assoc. website <https://www.ontariomidwives.ca/covid-19-clinical-faq>

Action Items:

MNCYN to inform the region when the revised COVID -19 Guidelines are released by the PCMCH /MOH

Item #2: LHSC Updates:

Screening tool launching September 2nd

A new screening tool is launching next Wednesday that allows staff and physicians to self-screen before they enter LHSC. This new process will increase the contact tracing capabilities should a staff member or physician test positive and will also help with data collection for tracking trends for COVID-19 wave 2 planning.

Michelle Basacco (LHSC): There is also a new contact tracing form for visitors coming into the hospital. Visitor restrictions have changed to be slightly less restrictive. No other news aside from the launch of the new screening tool and LHSC is now allowing some of their Antenatal patients to have a LOA. This is important for the mental health of these long term stay patients.



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NICU: No one present to give a report from LHSC NICU

Regional Q & A:

Kerri Hannon (Stratford): Emailed a question to the region regarding OB patients who are asymptomatic for COVID and are transferred from another hospital

- a) If they come from the transferring hospitals emerg – do you swab for COVID and isolate?
- b) If they come from the transferring hospitals inpatient unit – do you swab for COVID and isolate?

Stratford Hospital Infection Control says now that they do have to swab and isolate these patients, which prior to this they had not been doing.

Concern is when they get a transfer from a level 1 facility, usually this patient goes directly to the OR and would be treated as suspect for COVID. Now that baby requires intervention and maybe even CPAP, we are now isolating mom and baby and if baby is on CPAP will need negative pressure.

This is a patient that screened negative for COVID at the sending hospital so it seems like a bit much to have to do all of this. Are we concerned they came into contact with COVID at the sending hospital? We need to remember that you could also pick up asymptomatic carriers or someone incubating the virus? Not sure what is the best practice for this.

Michelle Bassaco (LHSC): LHSC is not re-swabbing patients who are asymptomatic and were swabbed at the sending hospital. They are placed on droplet/contact precautions until results are back and, if negative, they are not being re-swabbed and precautions are discontinued.

Jocelyn Patton-Audette (Owen Sound): Owen Sound is re-swabbing, but doing a rapid test in which they can get the result back in less than 1 hour. Often they have not received the swab result from the sending hospital yet because their turn around times are much longer.

Action Items:

Gwen Peterek to inform Kerri Hannon (Stratford) of practice at LHSC and Owen Sound.

We will check in with you again in a couple of weeks. The next Perinatal WebEx meeting scheduled for **Sept. 14th from 1500 – 1530 hr.**



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*Reminder for those that also participate in our Paediatric calls that the Paeds. calls have been changed to monthly so the next one is this **Wed. September 2nd from 1600 – 1630 hr.***

If you have any comments or questions don't hesitate to reach out to us and we will try to get the answers for you as soon as possible.

Adjourned: 1515 Hrs.