

Asymptomatic Testing for COVID-19 for UNC L&D Patients

(This document is to support providers as they inform their prenatal patients about testing on UNC L&D for asymptomatic patients who will be admitted to NC Women's Hospital)

What do I tell my patients in clinic about why we are doing this testing?

UNC Women's Hospital is now going to test all delivering women for COVID-19 – even women without symptoms of COVID-19. We are doing this testing in order provide a higher level of care and safety for yourself, your family, and your newborn.

The test is done by getting a nasopharyngeal (NP) sample by a cotton swab – similar to a flu test. It takes less than 20 seconds to do the test. The test is completed by a nurse or other health care provider. If you are scheduled for a c-section or induction of labor, we will ask you to get your testing completed 1-2 days prior to the date of your admission so that there is no delay in your care. If you come in for an unplanned delivery (for example, you are in labor), then we will do the test on the Labor & Delivery unit. We will continue to provide the same level of care as we would always provide while your test results are pending.

Will we be able to test women with planned admissions (IOL, scheduled csec) prior to admission so that their care is not delayed?

Women who already have procedures scheduled after 5/7/20 will be contacted by L&D with detailed information on how, when and where to complete their testing 1-2 days prior to their procedure.

What if my patient refuses the test?

We will work to help the asymptomatic patient understand the benefit of the test though we cannot force the test. The patient will continue to get the same level of care and will not be treated like a PUI.

What if my patient's test is positive?

The patient will be treated the same as a symptomatic COVID patient. Her visitor will be able to stay with her but will not be allowed to leave the room until her discharge. Early epidural is recommended for COVID patients, but this will only be done after discussion of R/B/A with the patient. The newborn nursery will counsel her regarding her options for rooming-in versus separation and will make a decision based on the wishes of the family. The patient may breast feed and obtain lactation services. She will continue to receive care from her chosen healthcare service unless consultation or transfer is requested by her healthcare team.