CARE AND COUNSELING OF THE PREGNANT PATIENT

STANDARD NO(S): NYSSA# 160

DATE: June 11, 2009

REVISED: 01/14/2011 REFER TO: Nancy Osborne, RN

I. OBJECTIVE:

To establish the Seneca County Correctional Facility's policy and guidelines for treatment and care of pregnant inmates.

II. POLICY:

All pregnant inmates will receive timely and appropriate prenatal care by qualified health care practitioners.

Individuals who specialize in obstetrical care will provide prenatal care off-site.

Prenatal care will be scheduled on a regular basis and will include examinations, advice on appropriate levels of activity, safety precautions, nutritional guidance and counseling.

III. DETAILS:

- A. Urine for pregnancy testing will be collected if ordered by the physician at the time of receiving/screening, or at the time the inmate informs a health services staff member of the possibility of being pregnant.
- B. Documentation should include prenatal history in which the following are addressed:
 - a. Medical, surgical and obstetrical history
 - b. Family and social history
 - c. High risk factors including drug, tobacco, and alcohol use, infectious diseases, past obstetrical complications and chronic health conditions.
- C. While pregnant inmate is incarcerated the following will be done:
 - a. Routine urine testing for ketones, proteins, vital signs, fundal height and fetal heart tones should be assessed at each prenatal visit if ordered by the OB physician and these are usually done at the outside visit unless ordered to be drawn at the jail.

- b. Vitamins with iron supplements will be provided, if ordered by the OB physician.
- c. Special diets will be provided if ordered by the OB physician.
- d. All staff will observe for signs of toxemia, including fever, hypertension, abdominal pain, uterine cramps, vaginal bleeding, severe headaches, visual changes, and edema.