CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

MEMORANDUM

Date:	January 22, 2021
To:	Diane O'Laughlin, Chief Nurse Executive
From:	Heidi Halberg, Policy Analyst
Subject:	**2021 UPDATE TO LOCAL OPERATING PROCEDURE 165 PREGNANT PATIENT CARE**

A review has been conducted on Local Operating Procedure 165 Pregnant Patient Care by HPM II M. Ramos, SRN II J. George and HPS I C. Thompson. The following edits were made:

1) Minor grammar and formatting edits.
2) Updated signature blocks.

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LOP Number:	**165**	Effective Date:	July 2016
LOP Title:	**PREGNANT PATIENT CARE**	Revision Date:	March 2021
Program Area:	Medical Services Program	Attachments:	Yes ☐ No ☒

I. PROCEDURE OVERVIEW:

Folsom Women's Facility (FWF) staff shall provide medical care for the pregnant patient population until transfer to another institution can occur.

II. RESPONSIBILITIES:

The Chief Executive Officer (CEO) shall have overall responsibility for this procedure. The Chief Medical Executive (CME) and Chief Nurse Executive (CNE) or designees shall be responsible for the operation of this procedure.

III. PROCEDURE:

A. GENERAL REQUIREMENTS

Refer to Health Care Department Operations Manual (HCDOM), Chapter 3, Article 1.16, Patient Care During Pregnancy and Childbirth.

B. CARE OF PREGNANT PATIENTS

1. Care provided to pregnant patients awaiting transfer shall include:
   - An initial Obstetrician / Gynecologist Overview (OB/GYN) visit shall be scheduled to occur within seven (7) days of pregnancy diagnosis.
   - Diagnostic studies ordered as medically necessary.
   - The option to be tested for the human immunodeficiency virus (HIV).
   - Education by a Primary Care Provider (PCP) or Obstetrician regarding the availability of pregnancy options such as:
     - Continuing pregnancy and childcare plans.
     - Adoption, termination services, and obtaining pregnancy information pamphlets or other pertinent educational material.
   - Health Care Staff shall document the provision of this education in the patient's health record.

C. PREGNANT PATIENT PROVISIONS

1. Positively identified pregnant patients shall be:
   a. Transferred from FWF to California Institute for Woman (CIW) within 30 days of pregnancy diagnosis or as soon as the PCP makes the clinical recommendation for expedited transfer.
      1) If unforeseen circumstances prevent the transfer of the patient, the Warden and CEO shall expedite and/or resolve the transfer and housing of the patient.
      2) If an expedited transfer cannot be arranged, an outpatient evaluation shall be conducted by a State employed OB/GYN or the PCP shall submit a high priority Request for Services.
   b. Prescribed prenatal vitamins, which contain iron and folic acid.
   c. Prescribed two (2) extra cartons of milk and two (2) extra servings of fresh fruit and two (2) extra servings of fresh vegetables daily. The PCP or Nurse Practitioner may order additional nutrients, or supplements, and /or referral to a Dietician as necessary.
   d. Assigned a lower bunk via CDCR 1845, Disability Placement Program Verification chrono.

e. Referred to the dentist on a priority basis for evaluation and treatment of periodontal disease.

D. DOCUMENTATION

1. All documentation regarding pregnancy-related information shall be scanned into the patient's health record by Health Information Management.

E. MEDICAL CLASSIFICATION

1. The PCP shall update the patient's Medical Classification Chrono (MCC) (*via the MCC web application on Lifeline*) to indicate the necessity of the patient to be placed in the pregnancy program in the specialized services section of the MCC.
2. The PCP will update the CDCR 7410, Comprehensive Accommodation Chrono eForm to indicate a patient's pregnancy on the "other" section of the form to provide lower bunk accommodation.

F. SECURITY

1. FWF custody staff shall supervise pregnant patients in the same manner as other patients with the exception of the application of restraint gear and physical restraint with force. (*See California Code of Regulations, Title 15, Section 3268.2 – Use of Restraints).*
   a. Restraint gear (handcuffs) and physical restraint shall be utilized only when a pregnant patient poses a threat to the physical safety of herself or others (including the unborn child), threatens substantial damage to State property, or attempts escape.
   b. In every instance, special effort shall be made to avoid harm to the unborn child. If handcuffs are applied, the patient's arms shall be brought to the front of her body for application.
   c. No leg restraints or waist chains shall be applied.
   d. When transporting the pregnant patient off grounds for medical care and treatment, the application of restraint gear shall be restricted to handcuffs to the front of the patient only. CDCR Form 7252, Request for Authorization of Temporary Removal for Medical Treatment shall state in the remarks section, *"Transportation restraint equipment in accordance with the guidelines of Harris vs. McCarthy settlement".*

IV. REFERENCES:

- Health Care Department Operations Manual, Chapter 3, Article 1.16, Patient Care During Pregnancy and Childbirth.
- California Code of Regulations, Title 15 Crime Prevention and Corrections, Section 3355.2, Treatment for Pregnant Inmates.
- California Code of Regulations, Title 15, Section 3268.2 - Use of Restraints.
- California Correctional Health Care Services Memorandum, dated September 13, 2016, Request for Changes in Reception and Housing Policies for Pregnant Inmates.

V. APPROVAL

2-24-21

DIANE O'LAUGHLIN, DNP
Chief Nurse Executive
Chairperson, Nursing Program Subcommittee

Date

2/26/21

OLIVER LAU, MD
Chief Medical Executive
Chairperson, Medical Program Subcommittee

Date

Karen Brown

3/12/2021

KAREN BROWN, MAOM, CCHP
Chief Executive Officer, Health Care
Chairperson, Quality Management Committee

Date

3/8/21

RICK M. HILL
Warden
Folsom State Prison

Date