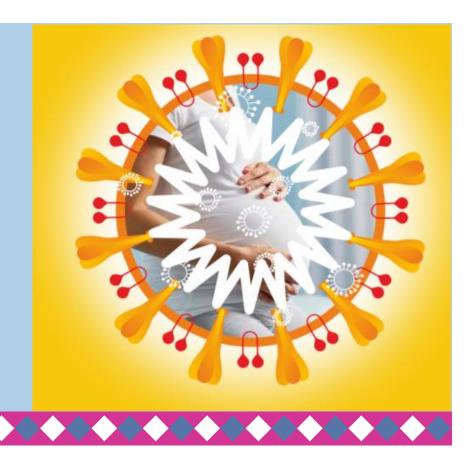


A healthy world begins with a healthy woman

Postnatal Care during COVID-19 Pandemic



Breastfeeding Guidelines for COVID Suspected & Confirmed Mothers



- There is no evidence so far that women with COVID-19 need to be separated from baby.
- Kangaroo mother care, early initiation of breastfeeding is recommended just like it is done in normal scenario.
- Undertake hand washing before and after contact with baby.
- Wear a mask when feeding baby or near to baby (respiratory hygiene).
- Routine cleaning and disinfecting of all surfaces that the mother had contact with or any other infected person.
- If woman is too sick to breastfeed, she can express breastmilk and feed her child.

^{*}Source: COVID-19 Technical Brief for Maternity Services- UNFPA, WHO, IAP

Safety Measures while Breastfeeding Infants



Wear mask while breastfeeding or whenever near to the baby



While breastfeeding...



Practice respiratory hygiene and wear a mask while breastfeeding



Wash hands for 40 seconds with soap and water before and after touching the baby



Routinely clean and disinfect surfaces touched by infected mother/others with soap or alcohol based sanitizer

^{*}Source: UNICEF, WHO & USAID

When Mother is too Sick to Breastfeed...



If mother is too sick to breastfeed, express milk in a properly cleaned container and feed your baby with a clean spoon





Steps before expressing breastmilk:

Wash breasts with soap and water.



Steps while feeding expressed milk



*Source: UNICEF, WHO & USAID, IAP

Key Messages on Breastfeeding



- Breastfeeding protects baby from infections and is the best source of nutrition.
- All mothers infected with COVID-19 or not, should continue breastfeeding her child by following all the preventive measures and guidelines.
- All mothers should breastfeed their child within 1 hour of birth and continue exclusive breastfeeding for 6 months. On completion of 6 months, complementary feeding should begin with continued breastfeeding for 2 years or more.
- If mother is COVID-19 positive:
 - Contact medical facility and follow the instructions given by doctor
 - Wear 3 layered mask
 - Wash your hands for 40 seconds
 - Follow respiratory hygiene
 - O When mother is too sick to breastfeed, she can express her milk and feed her child with spoon

If Mother is too Sick to Express Breastmilk



If mother is too sick to breastfeed or express breastmilk, she should explore the possibility of:



Restarting breastfeeding after a gap



If available, donor milk can be fed to your baby

Wet Nursing

Another woman breastfeeding or caring for your child

*source: Ministry of Health and Family Welfare

Visitors Guidelines after Delivery



- Visitors need to be limited in home or health facility. Anyone with acute respiratory symptoms or possible COVID19 infection or contact, should be excluded from the health facility.
- All visitors need to follow infection control procedures and wash their hands with soap and water on entering and leaving the room.

^{*}Source: COVID-19 Technical Brief for Maternity Services- UNFPA

Complementary Feeding Practices



For baby's rapid growth and brain development, on completion of 6 months caregivers/mothers should:

- 1. Start complementary food along with breast milk
- 2. Make child's every bite count by feeding the child a variety of foods such as pulses, milk and milk products, yellow, orange and green vegetables and fruits
- 3. If fresh foods are not available due to lockdown, identify healthy food options, limit highly processed foods that are typically high in saturated fat, sugars and salt, and avoid sugary drinks
- 4. Wash hands with soap and water before cooking, feeding and eating
- 5. Clean the food preparation area with soap and water
- 6. Wash child's hands with soap and water before feeding
- 7. Feed the child from a separate bowl
- 8. Use a properly cleaned bowl and spoon to feed the child
- 9. Feed children usual amount of foods and fluids more often during illness

Immunization Services during COVID-19



As a standard practice, Immunization services are delivered through the following modes:

Birth dose vaccination

Health facility based session

Outreach session

Birth dose vaccinations at delivery points in health facilities.

Immunization sessions at fixed health facilities like Health Post, UPHC, Maternity Home etc. As part of Urban/Village Health Sanitation and Nutrition Days (UHSND/VHSND) services.

*Source: Ministry of Health and Family Welfare (vide letter dated 14th April 2020)

Immunization Services during COVID-19



MoHFW has issued guidelines for continuation of essential services including immunization. Based on the guidelines released, following points will be followed irrespective of zones.

- Birth dose vaccination (BCG) will be continued at all health facilities
- Practices of social distancing, hand washing and respiratory hygiene need to be maintained at all immunization sessions
- Guidelines from MHA and MoHFW pertaining to COVID-19 and related updates will be the primary reference points

Immunization Services in Containment and Buffer zones



- Areas where COVID-19 cases are reported are known as 'Containment Zones'.
- Surrounding areas with risk of COVID-19 spread are called 'Buffer Zones'.
- Area outside the buffer zone is identified as 'Area beyond Buffer Zone'.

Note: The categorization of 'Containment Zone' and 'Buffer Zone' is a dynamic process updated on a weekly basis or earlier.

Immunization Services in Containment and Buffer Zones



- No active mobilization to the health facility to be carried out
- Every opportunity is to be utilized for vaccinating beneficiaries if they have already reported at the facilities
- Ensure social distancing and hand washing etc. as outlined in the annexure, to be adopted at health facility level for vaccinating the pregnant women and children who have reported to these facilities

Any area exiting a 'containment/ buffer zone' can start facility based and outreach immunization activities as in areas 'beyond buffer zone' after a minimum gap of 14 days following delisting of that area as Containment/Buffer zone. However, district administration should assess the COVID-19 situation before starting such services.

Immunization Services in Beyond Buffer and Green Zone



Birth dose and health facility based session remains the same. However, some modifications have been suggested for outreach sessions.

Modified Outreach Session:

- One outreach session will be planned for <500 population to limit the total beneficiaries to 10 to 15 per session. A staggered approach will be followed for each session to avoid crowding
- At any a given time during session, not more than 5 persons should be present at a session site with at least 1-meter distance between each
- The organization of such session will be at the discretion of district administration with clear planning for social distancing and handwashing at session site
- All necessary measures to be adopted for the prevention and control of COVID-19

^{*}Source: Ministry of Health and Family Welfare (vide letter dated 14th April 2020)

Standard Guidelines for all Outreach Sessions Irrespective of Zones



- Universal prevention and control principles for COVID-19 to be followed for each Session
- All outreach sessions to follow staggered approach as outlined in the annexure and community mobilization strategy to be adapted accordingly to prevent overcrowding at session site
- Pre-identification of session site with adequate seating space for beneficiaries and caregivers
 while maintaining social distancing (at least1-meter gap) with clear area of demarcation for
 incoming beneficiaries, post vaccination waiting area and a reserve zone if gathering
 increases
- Support from Panchayat/Urban Local Body to be sought for identification of appropriate session site with adequate space to practice social distancing (at least 1 meter)



Postnatal Care other than during COVID-19

Breastfeeding



Breastfeeding should be started within the first hour of birth. The stomach size of the new born is 1.5cm in diameter approximately

By day 3 it increases to 2.5 cm and by day 10 it becomes 3.7cm in diameter. The amount of milk the mothers produces is in accordance to the increasing stomach size

Note: If we give more milk, than the stomach—size than there is a chance of vomiting and aspiration, i.e. milk going into respiratory tract of the child which may lead to death

The first hour is best to start breastfeeding as the baby is awake and alert. Soon the baby will go into a deep sleep and then it may become difficult to start breastfeeding.

- For the first 2 to 5 days after delivery, your body produces colostrum (first milk). It is your child's first vaccine, do not miss it
- Skin-to-skin contact immediately after birth and zero separation of baby from Mother helps in establishing and continuing breast feeding

^{*}Source: Sneha MNH key messages

Immunization



The first day, the baby will be given injections are Vitamin K1, BCG, Hepatitis B and Oral polio. Vitamin K1 vaccine is given within one hour of birth to prevent rare bleeding disorders in new born which can cause serious problems

*Source: Sneha MNH key messages

Immunization Chart



टीके का समय	टीके का नाम	टीके का स्थान
जन्म के समय/२४ घंटे के अंदर	बी.सी.जी	बायां हाथ की ऊपरी बांह
	ओ.पी.वी (0)	ओरल
	हिपेटाइटिस बी (जन्म ख़ुराक)	दायाँ जांघ के बीच में
6 हफ़्ते	ओ.पी.वी १, आर.वी.वी १	ओरल
	f- आई.पी.वी 1	दायाँ हाथ की ऊपरी बांह
	पेंटा 1	बायां जांघ के बीच में
_	ओ.पी.वी २, आर.वी.वी २	ओरल
10 हफ़्ते	पेंटा 2	बायां जांघ के बीच में
	ओ.पी.वी ३, आर.वी.वी ३	ओर्ल
	f- आई.पी.वी 2	दायाँ हाथ की ऊपरी बांह
14 हफ़्ते	पेंटा ३	बायां जांघ के बीच में
9 माह	एम.सी.वी 1 + विट. A (ओरल)	दायाँ हाथ की ऊपरी बांह
16 -24 माह	ओ.पी.वी बूस्टर	ओरल
	एम.सी.वी 2	दायाँ हाथ की ऊपरी बांह
	विट. A	ओरल
	डी.पी.टी बूस्टर (पहला)	बायां जांघ के बीच में
5-6 वर्ष	डी.पी.टी (दूसरा बुस्टर)	बायां हाथ की ऊपरी बांह (अधिकतर)
10 वर्ष	टी.डी	बायां हाथ की ऊपरी बांह (अधिकतर)
16 वर्ष	टी.डी	बायां हाथ की ऊपरी बांह (अधिकतर)

* f-आई.पी.वी: फ्रैक्शनल

*source: WHO, MCGM M/East Ward

Caring for your Child



- Umbilicus should be kept dry and clean. Lukewarm water should be used for cleaning and cord should be kept exposed to air
- Practice gentle and minimal handling of pre-term babies. Parents and health care providers should follow strict hand hygiene practices
- Give sponge bath only till the baby attains 2.5 kg weight. After that, regular bath can be given, using a mild cleanser
- Routine bathing of new born and infants doesn't cause any harm. Daily baths are more preferable. During winter, babies may be given bath twice or thrice a week

DO NOT do the following



- Giving honey or 'Janam Ghutti" to a baby before 1 year of age
- Not giving breast milk for few days after birth
- Cow's milk thinking it's light & sacred
- Over applying baby powder
- Giving a hard massage or giving a massage too often
- Trying to remove body hair using besan and atta (gram and "wheat flour)
- Applying 'surma' or 'kajal' to a newborns' eyes
- It is best not to tie a black thread around your baby's wrist or neck. This can lead to choking, strangulation, infection in the skin. If need be, one can put a kaala teeka on the forehead or foot
- Putting a few drops of oil in the ear and navel

Danger Signs in Newborns



Educate the mother to recognize danger signs which are:

- Difficulty in breathing, chest in-drawing, grunting.
- Breathing very fast or very slow
- Frequent and long spells of apnea
- The baby feels cold; body temp. is below normal
- Difficulty in feeding; baby doesn't wake up for feeds anymore, stops feeding or vomits
- Convulsions
- Diarrhea

*Source: Sneha MNH key messages



