



Sacopee Valley Birthing Services

www.sacopeemidwives.org

Serving women in southern Maine and eastern New Hampshire.

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Dear Families,

In order to keep our clients and ourselves healthy, and help slow the spread of the virus we are constantly updating our practice. With the recent increase in Covid 19 cases in Maine and nationwide, we want to update you with our revised protocols. We also wanted to share some thoughts with you as our communities continue social distancing and precautions surrounding COVID-19.

Sacopee Midwives continues to offer virtual free consults for you to determine if homebirth is right for you and your family.

We will continue to do virtual visits as wished by the client and as appropriate in early pregnancy. By 32 weeks we would like to see clients biweekly and in person.

We schedule visits at Brenda's home office and yours. We will use your home prenatal tools when available (see resources list) in order to keep ours clean and safe to use at births.

We ask that you and anyone else attending your visits wear a mask at all times. We do not ask you and your partner to wear a mask in labor, however we do require anyone outside of the family unit to wear masks at your labor.

The 24-48 hour postpartum visit will always include a visit from your midwives in your home in order to provide newborn screening and we will visit in person or have a virtual visit with you again at 3 days if needed and then 7-10 days in person at your home. Our 3 week and 6 – 8 week visit may be in person or virtual depending on your needs.

Occasionally we will use our office at 640 Brighton Ave, Portland Maine.

Your midwives are doing all we can to keep ourselves as exposure-free as possible to ensure our health for your birth. We will not attend births if we have any signs of sickness. We have been tested often. We feel fortunate to have a team of midwives in our practice, for many reasons, but especially now in case any of us were to be ill. We wanted to update you in regards to who is specifically involved in our team of midwives. Brenda, Lindsay and Acadia are currently the primary midwives providing in person care. Robin and Jodie are on-call on a part-time basis, and one of them may be the second midwife at your birth along with one of the other midwives you know well.

These are uncharted times, yet our aim continues of providing excellent, comprehensive personalized care to our clients, while supporting the sustainability and well being of our midwives and clients. We believe this allows us to continue to provide excellent care to all our clients that is safe and reliable. We are keeping our practice small so we can provide such care. We ask you to shrink your bubble of people you are in physical contact with for the sake of your family and all our other home birth families.

We request that you take virus precautions seriously.

- Social Distancing
- Sanitizing appropriately and washing hands for at least 20 seconds every time you come inside and before and after eating or touching your face, eyes or nose.

- Eating well and staying hydrated
- Sleeping peacefully
- Enjoying being home with your family!

• We use phone/video conference tools for some prenatal visits. We can use home blood pressure monitoring and other tools, whenever possible, to fulfill the physical exam components of the visits done virtually. The majority of our visits consist of talking and getting to know each other. We have the ability to do Facetime and Zoom. We need to inform you that these are not HIPPA compliant. If you feel like HIPPA is important to you in this respect, we can make other arrangements. We feel this precaution will also keep your midwives healthy to be able to continue to attend home births. Since it is possible to have multiple participants on these calls, sometimes you will see more than one midwife at your telehealth visit.

***We ask that folks purchase or borrow from us if available, the following home prenatal tools.**

Automatic Blood Pressure Cuff

Finger pulse oximeter

Centimeter tape measure

Doppler and gel (aloe works well)

Thermometer

• If a midwife and family suspects illness/ COVID-19 in their home at the onset of labor, we will discuss a plan with the family.

*Clients who have COVID-19 when they go into labor will not be eligible for home birth. We are in contact with Maternal Fetal Medicine and they are able to facilitate a direct transport for any of our clients who are ill, either for their birth or if they need hospital care prior to birth. MMC offers a video tour of the Labor and Delivery on their website. Please let us know if you are interested in a virtual tour of the hospital.

*Remember to support your immune system in all the ways you know how. We suggest including Vit C, Vit D, and Zinc. Elderberry is known to be antiviral and best used a preventative. Hydration, sleep, relaxation, fresh air and laughter are all supportive to the immune system.

Recommended resources:

*Two articles recently published in the Bangor Daily News regarding the current increase in interested for homebirth and how Maine midwives are adjusting their practices:

<https://bangordailynews.com/.../how-maines-midwives-are-adju.../>

<https://bangordailynews.com/2020/04/09/homestead/how-to-safely-home-birth-during-the-pandemic/?>

*Here is a great article by former midwife, now doctor, Aviva Romm on what we know about COVID-19, pregnancy, immune boosting, etc.

<https://avivaromm.com/covid-19-pregnancy-breastfeeding/>

She is offering a free class online class for those who are interested.

*Information from the CDC on COVID and pregnancy/breastfeeding. <https://www.cdc.gov/coronavirus/2019-ncov/prepare/pregnancy-breastfeeding.html>

CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fspecific-groups%2Fpregnancy-faq.html

*Information from the CDC that guides care of clients at home with COVID: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/disposition-in-home-patients.html>

Sending love and health to all of you,

Your midwives,
Brenda, Lindsay, Robin, Jodie and Acadia

This recommendation is effective November 19, 2020. We will re-evaluate this as new information becomes available and update/communicate at that time.