


SUBJECT: Women's Health Management	PAGE <u> 1 </u> OF <u> 4 </u>
	NUMBER: 68-MED-23
RULE/CODE REFERENCE: ORC 5101.55, 5101.56; AR 5120-9-57	SUPERSEDES: 68-MED-23 dated 09/06/13
RELATED ACA STANDARDS: 4-4353M; 1-HC-1A-10M	EFFECTIVE DATE: January 29, 2018
	APPROVED: 

I. AUTHORITY

Ohio Revised Code 5120.01 authorizes the Director of the Department of Rehabilitation and Correction, as the executive head of the department, to direct the total operations and management of the Department by establishing procedures as set forth in this policy.

II. PURPOSE

It is the purpose of this policy to outline procedural guidelines for delivery of health care services that are unique to women and not otherwise addressed in general medical policy.

III. APPLICABILITY

This policy applies to all persons employed by or under contract with the Ohio Department of Rehabilitation and Correction (DRC), particularly those involved in the delivery of health services to female inmates, and to all female inmates confined to institutions within the DRC.

IV. DEFINITIONS

Advanced Level Provider (ALP) - A medical professional who is approved to practice as a Physician, and Advanced Practice Nurse under Ohio Revised Code section 4723.43, or a Physician's Assistant under Ohio Revised Code section 4730.

Pregnancy Coordinator - Unit staff responsible for providing counseling and assistance to pregnant inmates in accordance with ORC 5101.55.

V. POLICY

It is the policy of the Ohio Department of Rehabilitation and Correction (DRC) to provide the health maintenance services and continuity of care to incarcerated female inmates that are unique to women. These services shall be accessible to all female inmates, shall include an emphasis on disease prevention, and shall reflect a holistic approach in accordance with approved levels of care.

VI. PROCEDURES**A. Screening and Baseline Evaluations for Women**

1. In addition to the reception screening procedures outlined in DRC Policy 52-RCP-06, Reception Intake Medical Screening, the following screening procedures shall be performed on all female inmates:
 - a. bHCG;
 - b. Baseline pap smears;
 - c. Screening mammogram for all female inmates over 50 years of age (if not pregnant).
2. Periodic health screening exams shall be offered to inmates in accordance with Medical Protocol B-5, Health Maintenance Examinations. Screening exams specific to the reproductive health of women shall be offered in accordance with guidelines established by the U.S. Preventative Task Force (USPTF) Level A and B Guidelines.

B. Pregnancy Management

1. Serum pregnancy testing shall be performed on all female inmates upon admission. Urine pregnancy testing shall also be performed for all sexually active female inmates suspected to be pregnant or who claim to be pregnant.
2. Upon verification of a positive pregnancy, medical staff shall refer the patient to the Pregnancy Coordinator and medical Advanced Level Provider (ALP).
3. In accordance with ORC 5101.55, the Pregnancy Coordinator shall counsel each pregnant inmate and provide comprehensive counseling and assistance. The Pregnancy Coordinator shall review and document the below pregnancy options with each pregnant inmate utilizing the Pregnancy Options form (DRC5408).
 - a. Prenatal evaluation, counseling and medical support;
 - b. Continuation of the pregnancy;
 - c. Participation in the Ohio Reformatory for Women (ORW) ABC's Nursery Program, when it is available, if criteria for participation are met;
 - d. Participation in placement planning of the unborn child;
 - e. Counseling and assistance with decisions regarding appropriate prenatal care;
 - f. Lactation issues;
 - g. Counseling regarding options for elective termination of pregnancy.
4. **Pregnancy Continuation**

If the patient chooses to continue her pregnancy, she shall have access to the following pregnancy management services:

- a. Counseling and assistance with decisions regarding appropriate prenatal services.

- b. Appropriate post-partum follow-up, as determined by the primary care physician in conjunction with the OSU Medical Center OB/GYN clinician.
 5. Routine and high-risk prenatal care shall be provided through a contractual agreement with an appropriate medical facility.
 6. Chemically addicted pregnant inmates shall be transferred to Franklin Medical Center (FMC) and managed by the institutional primary care physician, in conjunction with high risk OB/GYN specialists. Chemically addicted inmates shall be referred to Recovery Services using the Recovery Services Referral action within the electronic health record.
 7. All pregnant inmates shall be referred for nutritional evaluation and counseling by the institution dietary technician and/or dietitian.
 8. Ohio birth certificates/registry shall not list a correctional facility as the place of birth.
 9. The institution physician shall order subsequent pregnancy testing at any time pregnancy is suspected.
- C. Methadone Maintenance Therapy
1. Inmates admitted to DRC who are pregnant and on methadone maintenance therapy shall be transferred to FMC and evaluated on a case-by-case basis by the institutional physician, in conjunction with the High Risk OB Clinic, to determine whether to maintain the therapy or to wean the patient during pregnancy.
 2. Following delivery, all methadone maintenance therapy shall be discontinued.
- D. Guidelines for the ABC's Nursery Program and for infants born during confinement are addressed in Administrative Rule 5120-9-57, Prison Nursery Program and Infants Born during Confinement.
- E. Termination of Pregnancy
1. An abortion may be provided at state expense if it is necessary to preserve the life or health of the pregnant patient as outlined in ORC 5105.55.
 - a. The ALP who determines the necessity of the procedure and who will be performing the procedure must certify this in writing to the DRC medical director or assistant medical director.
 - b. ORC Section 5101.55 (C) dictates that state or local funds may not be used to subsidize an abortion unless it is performed to preserve the life or health of the pregnant woman.
 2. In order to facilitate reasonable access to abortion services, consistent with state and federal law, the Pregnancy Coordinator may arrange for pregnant patients who request

abortion services to be referred to an outside clinic for determination of gestational age and eligibility for a privately funded abortion.

3. The Pregnancy Coordinator may refer the patient to mental health services, as outlined in DRC Policy 67-MNH-02, Mental Health Screening and Mental Health Classification, to determine if the patient is competent to make such a decision.

Related Department Forms:

Pregnancy Options & Counseling

DRC5408