Pregnant in a Pandemic

Yale Health patient gives birth while positive with covid-19

IN EARLY MARCH, Alexandra “Rivka” Lieberman was 38 weeks into a relatively routine pregnancy with her second child. Then the world changed.

The symptoms started with a bad cough, sore throat, loss of taste and smell, and some stomach issues. Rivka and her husband Emmett Gilles, a 2020 Yale Law School graduate, attended gatherings celebrating the Jewish holiday of Purim on March 10th, just before the term “covid-19” started dominating our daily conversations. A few days later, Emmett also began having some symptoms, along with their now 2-year-old daughter, Ruthie. They discovered that an attendee of the religious gathering, whose family members Rivka interacted with at work, had tested positive for covid-19 following the event. That’s when they contacted Yale Health.

They were greeted outdoors at the ambulance bay in the Acute Care Department for testing by a host of clinicians. The clinical staff and family all wore the proper personal protective equipment (PPE) to meet the strict health and safety requirements. Along with testing for covid-19, Dr. Monique Rainford, chief of the Obstetrics and Gynecology Department, checked the fetal heart tones of the unborn baby. Everything was normal.

The family was instructed to isolate in their home until the test results were available. Tests for Rivka, Emmett, and Ruthie all came back positive for covid-19. With two weeks to go before adding another member, the family sat quarantined with Rivka holding the unwanted distinction of being Yale Health’s first patient scheduled to give birth while positive with covid-19.

“I was a little bit nervous about what could happen,” said Rivka, 27. “At that point, we were just trying to recover as quickly as we could.”

Yale Health staff contacted staff at Yale New Haven Hospital to discuss the procedure for when Rivka went into labor. She was to contact the on-call obstetrician when she believed it was time and contact the labor-floor charge nurse upon arriving at the hospital. Labor and delivery staff would then meet her at the hospital entrance to ensure proper PPE and the most efficient route to her room.
The family was also informed that it was a possibility no other family members would be allowed in the delivery room and the newborn might be isolated from the family in the hospital for up to two weeks following birth.

Nurses from Yale Health’s Obstetrics and Gynecology Department and Care Management Department were in constant contact with Rivka and Rainford used her network of clinical resources to seek out information about COVID-19-positive pregnancies.

“We wanted to make sure we were providing her with the best care possible,” Rainford said. “I was calling my contacts in New York because they were a little ahead of us. I wanted her to have the same level of care she would receive had she not tested positive as well as any additional care that she may have needed with her diagnosis. The best information that we had said everything should be fine, but there was no real way to know for sure.”

Rainford decided that Rivka should come to the Yale Health Center for her regularly scheduled checkups up until labor. She was seen weekly in the Inpatient Care Unit, where specially-designed clinical spaces had been created for patients with COVID-19.

On March 31st, Rivka awoke at 4:45 am with back pain that she recognized from when she gave birth to Ruthie. She knew it was time.

Rivka and Emmett dropped Ruthie at her parents’ house and contacted the on-call obstetrician on the way to the hospital. Upon arrival at the York Street campus, they checked in at the lobby as the hospital staff donned masks and gowns. Emmett was also outfitted in full PPE and Rivka wore a face mask and scarf while she was brought to a negative pressure room.

At the time, results from Rivka’s follow-up test were not available so she was considered positive. Since Emmett did not have any further symptoms and 14 days had passed since his initial symptoms, he was clinically cleared by the hospital’s infection prevention team and was allowed in the delivery room.

Ten minutes after arriving in the room, Rivka gave birth, while wearing a facemask, to their son Dovid, who weighed in at 8 pounds, 5 ounces.

Since she was wearing a mask, Rivka was allowed to hold Dovid for just a brief time before he was taken to a separate negative pressure room in the same suite. Emmett was able to join his son in that room and they used a video monitor provided by the hospital as well as FaceTime to allow Rivka to see the baby. As she could not breastfeed, Dovid was fed by soy formula via a syringe during their time in the hospital.

“It was really hard for the first 24 hours or so,” Rivka said. “Emmett would FaceTime me so I could see him, but it was hard not being able to hold him or be in the same room.”

The decision was made not to test Dovid because the results would not change the course of clinical care. On Rivka’s expected day of discharge, her second test came back positive. Because approximately three weeks had passed since her first symptoms, the hospital’s infectious disease team advised that normal contact with the baby was permissible following hospital discharge.

By this point, the hospital policy allowed for both Rivka and Dovid to return home 48 hours after delivery. Rivka rested on the recovery floor where she said she received exceptional care from Grace Lessard, MSN, RN, in Yale New Haven Hospital’s West Pavilion 8 Maternity & Newborn Unit. Rainford also came to check up on Rivka during her hospital rounds on the day of her delivery, but used an interactive video monitor to talk with her in order to save PPE for other hospital staff by not entering the room.

“I didn’t really need to see her clinically on that day, but I just wanted to see her and talk to her,” Rainford said.

The 48 hours ticked by and the family was ready to go home. Rivka was able to hold Dovid in his car seat while in a wheelchair on the way out. She held him in her arms as soon as she got home.

“It was wonderful,” she said.

All was as normal as could be for a family transitioning to adding another member. Dovid was breastfeeding and sleeping well. Rivka opted for telephone visits with Yale Health to limit the infant’s exposure outside of the home.

Looking back, Rivka said she credits Yale Health with keeping them informed and feeling confident throughout the entire situation.

“I really had an exceptional experience,” Rivka said. “Things were changing by the minute and Yale Health kept us up to date as much as they could. We knew they had gotten to know us and were advocating for us. We were well taken care, in some cases, from afar.”
Yale Health has taken multiple precautions to keep visiting members safe. We are adjusting schedules and volumes of patient visits to ensure that visitors do not encounter crowds.

FROM THE DESK OF PAUL GENECIN, MD

One unfortunate byproduct of the COVID-19 pandemic is fear of catching the infection in healthcare settings. At Yale Health and across the country, the number of patients seeking care dropped sharply with the start of the pandemic in March. Emergency departments and hospitals noted striking decreases in patients presenting with conditions ranging from routine to life-threatening. Patients with chronic problems like diabetes and hypertension have also stayed away, yet many need ongoing care. Now that we have sufficient COVID-19 tests and personal protective equipment (PPE) to offer in-person care safely, we must combat the trend of avoiding care if we are going to avoid a shadow epidemic of non-COVID illness resulting from delayed or avoided care.

Yale Health telemedicine appointments (telephone and video visits) are easy. You do need a MyChart account for video visits, but you do not need any special technical skills. While telemedicine visits are convenient and appropriate for many healthcare needs, in-person visits are essential at times. For example, difficulty breathing, chest pain, neurological symptoms, injuries, and high fevers should be on everyone’s short list of emergencies mandating immediate in-person evaluation. There are many less dramatic examples of problems a clinician must evaluate in person, and to state the obvious, blood tests and diagnostic imaging studies must also take place in person.

Childhood vaccines are an important example of care that patients must not defer because of the pandemic. Likewise, our clinicians strongly endorse the influenza vaccine (“flu shot”) for members 6 months and older and, for seniors, the vaccine protecting against an important cause of pneumonia (pneumococcal vaccine), among others.

Patients who are due for colon cancer screening can safely substitute fecal immunochemical testing (FIT) for colonoscopy, but screenings for breast and cervical cancer require visits. Postponing these tests may be reasonable in the short term, but not indefinitely.

Yale Health is adjusting schedules and volumes of patient visits to ensure that visitors do not encounter crowds. We are screening everyone entering the Yale Health Center each day to detect symptoms of respiratory infection and fever. Everyone wears face coverings and providers use the PPE appropriate to the specifics of the encounter. We have implemented many changes in clinical workflow and facility cleaning to ensure that we safely provide all the services our members may need.

If you need to visit the Yale Health Center, I hope that you will not hesitate. If you are in doubt, you should contact your primary care provider on MyChart or by telephone. We will be happy to collaborate with you to determine the right balance of in-person visits, telemedicine, and other services you may need to stay healthy during these challenging times.

Paul Genecin
Chief Executive Officer
Dr. Monique Rainford had her future pretty well planned out from a very young age. After her birth in New York and moving back to her parents’ hometown of St. Andrew, Jamaica, just outside of Kingston, before she was just a year old, Rainford knew she wanted to go into the medical field at the age of seven. She also knew she wanted to return to the United States to get her college education.

While ultimately achieving those goals, there were also plenty of unforeseen accomplishments to come along the way. Rainford joined Yale Health as the chief of the Obstetrics and Gynecology Department in January, replacing Dr. David Roth, who retired in June after 19 years with the organization.

“It is very rewarding to serve the people who, in a way, need it the most. I do not believe that what we have is accidental. If we have certain gifts or are given certain things, I think we should give back.”

While her career continued to advance, Rainford knew it was just a matter of time before she would return to Jamaica. In 2004, she felt the time was right and rejoined her parents back home to run her own private practice for the next 10 years.

During that time, she met and married her husband, Ryan Bourne, and had two children, a son Zane and a daughter Kia. With her family growing, Rainford began to think about future opportunities and ultimately decided to move back to the United States in 2014 to continue her career.

She worked at the Women’s Ob/Gyn Group in Columbia, MD (affiliated with St. Agnes Hospital) and held multiple positions at various healthcare facilities in the area for the next several years. Immediately prior to joining Yale Health, Rainford worked for two years as the Center Medical Director for two of the health centers of Baltimore Medical System on the campus of St. Agnes Hospital in Baltimore.

“We were very impressed by Dr. Rainford’s dedication to her clinical field as well as her experience in leadership,” said Dr. Paul Genecin, chief executive officer of Yale Health. “We felt that she would be a great fit with our patients and staff. (Chief Medical Officer) Dr. Jennifer McCarthy and I are excited about the opportunity to collaborate with Dr. Rainford and we welcome her to our physician leadership team.”

While juggling the responsibilities of both a family and career, Rainford has always found time to give back to the community, something her parents instilled in her at a young age. Her father is a member of the Rotary Club of Kingston and her mother is a past president of the Inner Wheel Club of Kingston.

She volunteered in underserved communities throughout her time as an undergraduate, in medical school, during residency, when living in Jamaica, and as a Rotarian. She has also been on a medical mission trip to Honduras. She served as president of the Jamaica Menopause Society, the Jamaica Association for the Advancement of Midlife Health, and volunteered at the Jamaica Cancer Society.
“Service was a very important part of our lives,” Rainford said. “It is very rewarding to serve the people who, in a way, need it the most. I do not believe that what we have is accidental. If we have certain gifts or are given certain things, I think we should give back.”

Rainford also gives back through her love of writing. It began with writing columns for the local newspaper in Jamaica and eventually those columns turned into a book titled *The Maternal Glow: A Jamaican Woman’s Guide to Pregnancy*. She also wrote a book titled *Please God Send Me a Husband*, in which she shared her experiences while single and interviewed married women to get their perspectives and share advice with single women hoping to get married and having trouble finding the right person. She waited to publish the book until 2015, about nine years after she married her husband because, “I like happy endings, so to speak.”

In her new role at Yale Health, Rainford hopes to find opportunities to give back to her new community once she settles in a bit. She plans to start by serving her patients at Yale Health.

“I value people and relationship building,” she said. “In a clinical setting, even though it’s often a short amount of time, it’s a nice opportunity to build relationships with patients. Being empathetic is a priority for me. I think it helps me connect better. I also think it is so important to listen and get a patient’s perspective. It helps us to be our best as clinicians.”

“Dr. Rainford brings years of clinical and leadership experience that made her ideally qualified for this position,” said Dr. Jennifer McCarthy, Yale Health’s chief medical officer. “It was clear during the interview process that her engaging leadership and communication style are well suited to help lead Yale Health into the new decade.”

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**What’s in a Name? A lot!**

Share your preferred first name with Yale Health

As part of its commitment to creating a welcoming environment for everyone, Yale Health announced in a January email to its members the ability to now indicate a preferred first name to be used during your interactions with Yale Health.

You can make the change online in *MyChart* (see instructions below), during *e-check in at the kiosk*, when you check in for an *in-person appointment*, or when you schedule an appointment with the *Call Center*.

Yale Health will make every effort to use the name you would like to be called during your visits. Your legal name may appear on communications with the first name you have indicated in “quotes”. A legal name is sometimes required for things like medical claims, prescriptions, and lab work.

“We recognize and respect that our members may wish to use a name that differs from their legal name,” said Dr. Jennifer McCarthy, Yale Health’s chief medical officer. “Being able to provide the opportunity for you to share this with us helps to facilitate patient-centered communication and create a welcoming environment for all.”

Yale Health is continuing its process of creating systems to collect and use the first name that is most comfortable for you. Please contact Yale Health if you have any concerns so they may partner with you to fix it.

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**How to Indicate Your Preferred First Name in MyChart:**

- Log on to *MyChart* on your computer (not the app).
- On the right hand side of the top navigation hover over “*Resources/Profile*.”
- Click on “*Personal Information*”.
- In the “*Details About Me*” section click on “*Edit*”.
- Type in your preferred name.
- Click on “*Save Changes*”.

For more information or to view video instructions on how to indicate your preferred first name in MyChart, visit [yalehealth.yale.edu/share-your-preferred-first-name-us](http://yalehealth.yale.edu/share-your-preferred-first-name-us).
Yale Health Welcomes New Staff

Kathleen Gang, MD
INTERNAL MEDICINE
Kathleen Gang has joined the Department of Internal Medicine after spending the past nine years providing primary care services at the Essentia Health-Ashland Clinic in Ashland, WI. She spent the previous 13 years serving the student population of the Northland College Campus at the Mainstreet Clinic in Ashland.

Gang earned her undergraduate degree in physiology from the University of Illinois at Urbana-Champaign in 1988 and her medical degree from the University of Illinois College of Medicine in 1992. She completed her residency in the Eastern Maine Medical Center Family Practice Residency Program in Bangor, ME in 1995 and went on to earn her MPH with a degree in epidemiology from the Harvard T.H. Chan School of Public Health in 2019.

When not in the office, Gang has been traveling annually since 2005 to the mountainous regions of northwest Honduras with a medical team. In 2018, her group formed a nonprofit organization, H.O.P.E (Health Opportunities and Potential through Education) for Honduras, Inc. of which she is president and co-founder. Gang became a Helping Babies Breathe master trainer in order to work with lay midwives in the rural areas of Honduras.

Amanda Hall, APRN
INTERNAL MEDICINE
Amanda Hall comes to Yale Health from the Connecticut Medical Group/North East Medical Group, where she provided primary care services in internal medicine. She previously worked at The Children’s Hospital of Philadelphia, the Mary Campbell Center and NeMours, A.I. DuPont Hospital for Children, both in Wilmington, DE, Nurses ‘n Kids in New Castle, DE, and The Oblates of St. Francis de Sales in Childs, MD.

She earned her licensed practical nurse certificate (2008) and associate degree in nursing (2009) from Cecil College in North East, MD and her bachelor’s degree in biology in 2012 from Washington College, in Chestertown, MD. Hall received her Complimentary and Integrative Therapies Certificate (CCIT) in 2015 before earning her MSN from Drexel University in Philadelphia, PA in 2017.

Hall has professional associations with American Family Physician, the American Academy of Neurology, the American Headache Society, the Academy of Integrative Health and Medicine, and Integrative Medicine for the Underserved.

FROM OUR MEMBERS

“Appreciate the adjustments during COVID-19. It’s especially helpful when the staff share explanations about the adjustments, which are all for our community safety.”

“My first video appointment (due to COVID-19) went perfectly. Great visit, smooth transition, great care. Thank you.”

“With COVID-19, there is a tremendous amount of work that had to be done to make health care safe for everyone. Yale Health has done an exceptional job and everyone I have come in contact with during my visits have been exceptional. Kudos!!!”
Erica Forsythe, APRN, PNP
PEDIATRICS

After earning her undergraduate degree in nursing from the University of Connecticut School of Nursing in 2008, Erica Forsythe received her MSN from the Yale University School of Nursing in 2013.

She has worked in Yale New Haven Hospital’s Neonatal Intensive Care Unit, where she assessed and cared for patients and families, participated in the plan of care with medical teams, and monitored outcomes of those care decisions. She was also a lactation resource nurse for mothers in that unit. She has worked for the past six years for ProHealth Physicians at the Bristol Pediatric Center, Windham Pediatrics, Shoreline Pediatrics, and ProHealth Extended Hour Centers.

Forsythe is an International Board Certified Lactation Consultant, a Certified Lactation Counselor, and a member of the National Association of Pediatric Nurse Practitioners.

Lilia Neichtadt, RN, IP
DEPARTMENT OF QUALITY AND SAFETY

Lilia Neichtadt brings 10 years of experience to Yale Health in identifying and assessing patient risk factors and obstacles to care, including infection prevention and patient safety administration. She joins the Department of Quality and Safety as its Infection Prevention Program Manager.

Neichtadt spent the last two years at Apple Rehab Coccomo in Meriden, where she planned, developed, organized, and evaluated its infection control program. She previously worked for five years in the surgical intensive care unit at Spectrum Health Hospitals Butterworth Hospital in Grand Rapids, MI, serving as the unit representative for infection control and safety management from 2013–2016.

She began her clinical career with Renal Advantage, Inc. in Wyoming, MI, managing dialysis from start to finish as well as providing instruction to patients on medications, preventive care, and health management.

She holds an MBA from the School of Business and Economics in Moscow, Russia and a BSN from Grand Valley State University in Grand Rapids, MI. She earned her Infection Prevention Certification in 2019.

Women’s Health and Cancer Rights Act Services

The Women’s Health and Cancer Rights Act (WHCRA) of 1998 provides benefits for mastectomy related services including all stages of reconstruction and surgery to achieve symmetry between the breasts, prostheses, and complications resulting from a mastectomy, including lymphedemas.

For more information, visit dol.gov/agencies/ebsa/laws-and-regulations/laws/whcra or speak to your primary care provider.

WW (Weight Watchers) Discount Extended to Spouses/Domestic Partners

Through Being Well at Yale’s partnership with WW (formerly known as Weight Watchers), active, benefit-eligible Yale faculty, staff, and postdoc associates can take advantage of the WW program with a subsidy reducing the cost of membership by more than 50 percent off the regular membership price. In 2020, the WW subsidy has been extended to spouses and domestic partners of active, benefit-eligible Yale faculty, staff, and postdoc associates.

Visit beingwell.yale.edu/weight-watchers for more information.
Flu Shot Information

Yale Health will continue to provide free flu shots to members of the Yale community this fall, but the process will look a little different than it has in the past in order to meet the required health and safety guidelines during the COVID-19 pandemic, including social distancing. Flu shots are free for all Yale staff, faculty, students, seniors, and Yale Health members.

The Centers for Disease Control and Prevention (CDC) universally recommends everyone 6 months and older should get a flu vaccine each year.

For more information about how and when you can get your flu shot, please visit yalehealth.yale.edu/flu.

Pharmacy Academic Hours

The Pharmacy has resumed academic year hours effective Tuesday, September 8th.

- **Monday**–**Friday**: 8:00 am–6:00 pm
- **Saturday**: 8:30 am–3:30 pm
- **Sunday**: Closed