


# Obstetrical Care at Louisville Metro Department of Corrections

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# Medical care at LMDC is contracted through 3C’s

# NATIONAL COMMISSION ON CORRECTIONAL HEALTH CARE

- NCCHC sets standards for health care in jails.






LMDC is the only NCCHC Accredited Jail in KY

LMDC meets or exceeds all NCCHC standards for OB care



# Prescreening

First evaluation occurs in the sallyport prior to booking

Initial screening done by corrections staff. Medical is called to evaluate any concerns identified.

Any emergent concerns are deferred to the hospital with police



# Intake Process

- A sexual/menstrual history is obtained.
- All women younger than 65 are offered a pregnancy test (Pregnancy tests are available at any time by placing a health service request)

# Pregnancy confirmed

- History obtained
  - Last menstrual period or due date
  - Past prenatal care
  - Screened again for pain, bleeding, h/o recent trauma
  - History of substance use
  - If >16 weeks and no prenatal care, pt is sent to the hospital for evaluation.





# Routine Orders

- An appointment is scheduled with onsite provider for next clinic day
- A prenatal vitamin is ordered
- Pregnancy diet is ordered
- For second/third trimester pregnancies, treatment orders are placed to ask patients about signs of labor and fetal movement each shift (patients can report concerns at any time!)

# Onsite Prenatal Visits

- Complete H&P
- All patient's are counselled about their wishes regarding family planning.  (family support or adoption)
- Evaluation of other medical conditions that may complicate pregnancy
- All patient's are referred to OB/gyn for management
- Fetal heart tones, fundal height, and vital signs/weight
- Management of common pregnancy related complaints
- Education on warning signs of pregnancy complications and signs of labor

# Off site OB Care

The Frequency of OB visits/ultrasounds is dictated by the consulting Obstetrician.



# Labor and Delivery

- Any signs and symptoms of labor are sent to OB triage for evaluation





# Security Considerations

- Per LMDC policy, in accordance with state law, Pregnant and Postpartum inmates are not shackled, only restrained with handcuffs in the front of the body.
- Laboring women are not restrained unless there is concern for harm to self, others or escape.

# Post Partem Care

- Patients are seen after discharge from the hospital by a medical provider to monitor for excessive bleeding, infection or other issues
- Patients are referred out to OB for postpartem follow up
- Patients are seen by mental health to screen for postpartum depression
- Breastmilk collection is supported if desired





# Opioid Use in Pregnancy

- Opioid use in pregnancy is associated with increased risk of miscarriage, preterm labor, fetal distress and stillbirth.
- CDC and ACOG recognize that abrupt detox from opiates increases these risks, especially in the third trimester
- Evidenced based practice is to offer medication assisted treatment

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# Management of detox in pregnancy begins at intake

- Pregnant women are screened for substance use
- Women who test positive for opiates are referred for initiation of suboxone or methadone, either on site or at the hospital depending on gestational age.



**Norton Maternal Opiate and Substance Treatment (MOST) Program**

**Norton Maternal-Fetal Medicine**

Norton Women's & Children's Hospital
4001 Dutchmans Lane, Suite 2174
Louisville, KY 40207
Phone: (502) 559-4375

# Inpatient management with MOST

- For women who are at least 16 weeks gestational age and have a urine drug screen positive for opiates
- Admission to Norton Women and Children’s for an average 2-5 days
- Management of withdrawal symptoms
- High risk pregnancy supervision and fetal monitoring
- Recovery treatment planning and follow up care before and after birth






Having an onsite OTP provides an increased level of support and counseling in addition to medication continuation.
This includes counseling, life skills, disease management, peer support and discharge planning to help assure continuity of care and success in recovery.

# How many pregnant patients do we see?

2026 YEAR TO DATE

**56**

**Number of bookings with pregnancy noted**

**8 days**

Average length of stay

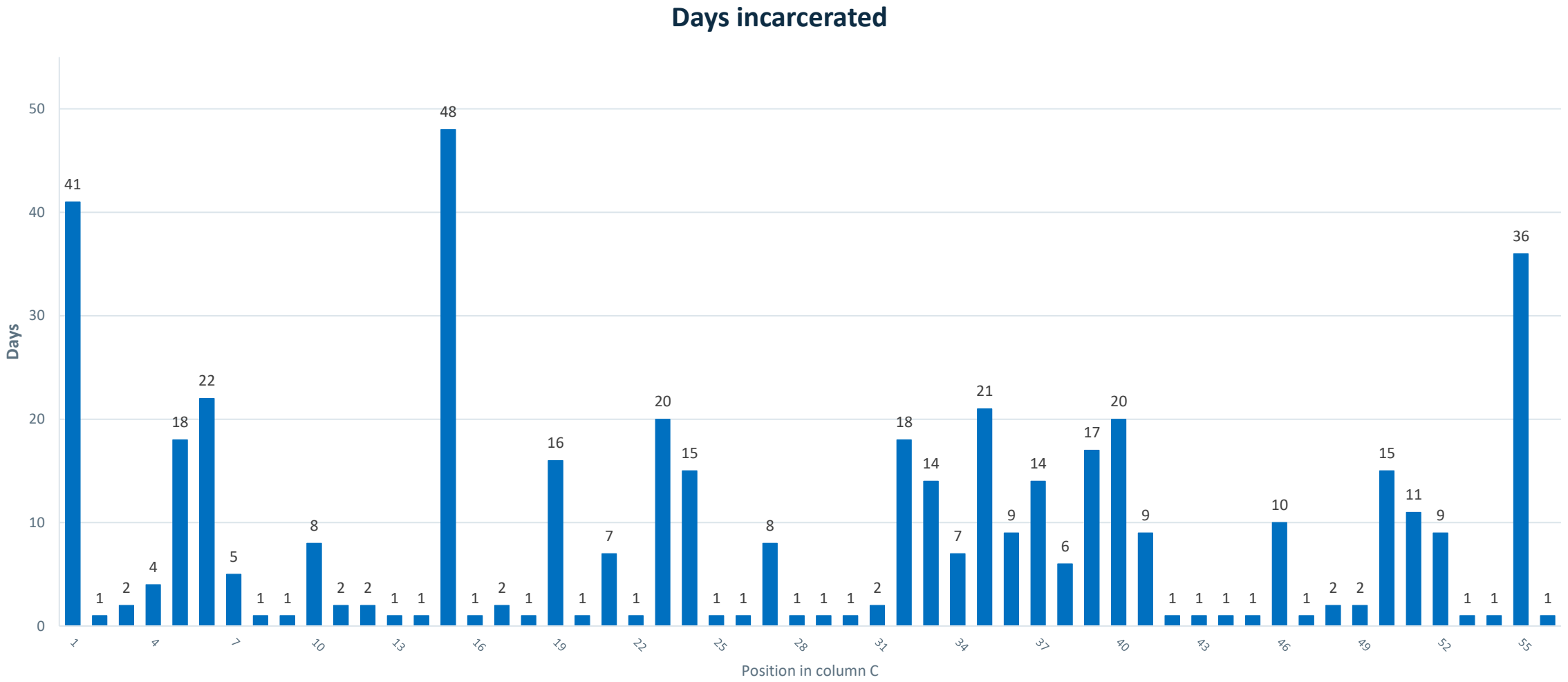
**14**

Opiate addicted pregnancies treated

**3**

Suboxone or Methadone initiations

# Length of Stay of Pregnant inmates at LMDC in 2026



# Future goals

Improved education and counseling

Continual training for staff

Building connections with community partners




Questions?