

# Recommendations of the Expert Group of the Polish Society of Gynecologists and Obstetricians regarding gynecological examination and treatment of a minor during the SARS-CoV-2 pandemic

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The recommendations present current methods of treatment that may be subject to modification and change in justified cases, after careful analysis of the given clinical situation. In the future, this may be the basis for their modification and updating.

Due to the spread of SARS-CoV-2 coronavirus infection and the reported increase in COVID, there was a need to set new standards for gynecological care for children and adolescents during a pandemic.

## Planning a visit

The child population is characterized by a low incidence of COVID-19. Over 90% of children infected with SARS-CoV-2 had contact to a sick person in their own household. Although children often have an asymptomatic infection, it is rare for any of the household members to experience no disease symptoms. Therefore, before planning a visit to the gynecologist, it is particularly important to conduct a thorough interview about the health status of the child and his household.

Before each planned medical procedure on a child, it is recommended to collect a thorough epidemiological interview with his legal guardian. The questions should relate to possible contact within the last 14 days with a person with confirmed COVID-19, a person in quarantine or in isolation. You should also ask questions about the current symptoms of the child and his or her household that indicate COVID-19 infection, *i.e.* fever, cough, sore throat, vomiting and diarrhea, weakness and loss of smell or taste. It is important to inquire about possible contact of household members with a person from epidemiological outbreaks, *i.e.* as employees of the mine in Silesia.

According to the announcements of the Polish Pediatric and Adolescent Gynecology (Polish PAG), it is not recommended that scheduled visits to the doctor's office be preceded by tests for SARS-CoV-2 infection. Of course, if any of the household members received a positive result, and the planned procedure is not necessary to save the child's health or life, it should be postponed to the nearest date safe for both parties [1].

## Before gynecological examination

A National Consultant in Obstetrics and Gynecology recommends that only healthy patients should be admitted for a visit to the gynecologist. It is also recommended to give up the presence of an accompanying person [2]. According to the applicable provisions of the Civil Code, a minor is one who is under 18 years of age. The exceptions are women after 16 years of age who, with the consent of the family court, got married and thus became of legal age. Therefore, the visit of a child and teenager in a gynecological office is associated with the presence of an additional person — their legal guardian. This should be borne in mind when collecting epidemiological history of both the patient and the person accompanying her during the examination [3].

Visits are planned at appropriate intervals to minimize the risk of contact with other patients. Patients should use personal protective equipment (*i.e.* masks, gloves), excluding children under 4 years of age for whom masks are not recommended. Before visiting a doctor, it is recommended that patients wash their hands with warm water and soap for 30 seconds according to hand washing instructions [4].

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### The course of the visit at the gynecological office during a pandemic

Gynecological examination is one of the most intimate medical procedures, extremely stressful and embarrassing for young girls. Mother's help is invaluable in this case. Appropriate preparation of the patient for examination by the mother / guardian significantly reduces the child's anxiety and improves the well-being of the minor before the examination. Earlier conversation about the gynecological examination has become particularly important during a pandemic, when the doctor's contact with the patient is significantly limited in time and takes place under sanitary regime with distance and the use of personal protective equipment [5].

An unusual doctor's outfit, *i.e.* a mask, a visor, goggles, tight aprons, can negatively affect the reception of the youngest patients, so it is important for the parent to prepare the child for such a situation.

A minor gynecological examination should be performed by an experienced pediatric gynecologist. In urgent cases, *i.e.* after genital trauma, the examination may be carried out by an experienced obstetrician-gynecologist or other specialist with due diligence in both the examination and medical records [6].

A pandemic has no effect on the indications for a minor gynecological examination. The most important of them, requiring an immediate visit regardless of the symptoms of COVID-19 infection or contact with an infected person, include: suspected sexual abuse, trauma to the genitals and pelvis, abdominal or abdomen pain, genital infections, abnormal genital bleeding.

Other indications for gynecological examination in girls, especially of a preventive nature, are assessed individually by the doctor. In the case of girls with a positive epidemiological history, if visit cancellation does not directly affect her health and life, it is recommended to postpone the examination. An appointment can then be scheduled after a minimum of 14 days has elapsed since contact with an infected person or in isolation (without symptoms), or immediately after obtaining two negatives COVID-19 swab result [6, 7].

### Medical history and physical examination

The current epidemiological situation does not significantly change the standards of collecting medical history and physical examination. However, the fact that the test time is reduced to the necessary minimum remains important. When possible, *e.g.* during an interview, it is a good habit to keep a safe distance between the doctor and patient.

Both medical history and physical examination should be conducted in accordance with the recommendations of the Polish Society of Gynecology and Obstetrics. Pursuant to the provisions of the Family and Guardianship Code, the examination should be carried out in the presence of a legal repre-

sentative (parent or legal guardian). It should be remembered that a minor may ask for a gynecological examination without witnesses (parent/guardian), which should be noted in the medical records. If the legal representative does not agree, this fact should be noted in the medical documentation and the examination might be then carried out in his presence [3, 7].

During the examination, the staff work in personal protective equipment according to the recommendations of the National Consultant in the field of Anaesthesiology and Intensive Care developed on the basis of the European Center for Disease Control and Prevention, and all equipment in direct contact with the patient is one-of [4].

After the gynecological examination, the patient and her parent/guardian should be provided with information on the patient's health, examination result and diagnosis. Next, possible further diagnostic and therapeutic methods, foreseeable consequences of their use or omission, and prognosis should be presented in an accessible way.

The pediatric gynecologist should also propose to a statutory representative and a minor over 16 years of age to carry out selected preventive examinations (including cytological examinations, with a recommendation every 12 months for sexually active minors) and the possibility of prophylaxis of HPV infection (protective vaccinations). In patients with negative epidemiological history of COVID-19, both cytological examination and vaccination against HPV can be safely performed even during a pandemic [8].

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