

**Intrapartum care for women with existing medical conditions or obstetric complications and their babies**

**Consultation on draft guideline – deadline for comments: 5pm on 23/10/2018, email: [IPCHighRisk@nice.org.uk](mailto:IPCHighRisk@nice.org.uk)**

	<p>Please read the checklist for submitting comments at the end of this form. We cannot accept forms that are not filled in correctly.</p> <p>We would like to hear your views on the draft recommendations presented in the guideline, and any comments you may have on the rationale and impact sections in the guideline and the evidence presented in the evidence reviews documents. We would also welcome views on the Equality Impact Assessment.</p> <p>In addition to your comments below on our guideline documents, we would like to hear your views on these questions:</p> <ol style="list-style-type: none"> <li>1. Which areas will have the biggest impact on practice and be challenging to implement? Please say for whom and why.</li> <li>2. Would implementation of any of the draft recommendations have significant cost implications?</li> <li>3. What would help users overcome any challenges? (For example, existing practical resources or national initiatives, or examples of good practice.)</li> </ol> <p>See section 3.9 of <a href="#">Developing NICE guidance: how to get involved</a> for suggestions of general points to think about when commenting.</p>
<p><b>Organisation name – Stakeholder or respondent</b> (if you are responding as an individual rather than a registered stakeholder please leave blank):</p>	<p>British HIV Association (BHIVA)</p>
<p><b>Disclosure</b> Please disclose any past or current, direct or indirect links to, or funding from, the tobacco industry.</p>	<p>None</p>
<p><b>Name of commentator person completing form:</b></p>	<p>Dr Yvonne Gilleece</p>

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Type		[office use only]		
Comment number	Document [guideline, evidence review A, B, C etc., methods or other (please specify which)]	Page number Or ' <u>general</u> ' for comments on whole document	Line number Or ' <u>general</u> ' for comments on whole document	Comments
Insert each comment in a new row. Do not paste other tables into this table, because your comments could get lost – type directly into this table.				
1	Guideline	6	18-19	We would recommend that the multidisciplinary team has both an obstetric and speciality physician familiar with the woman's existing medical condition – not one or the other. This works very well in the context of HIV where both the obstetrician and HIV specialist work together to provide best care for the woman.
2	Guideline	46	12-14	The selection of suspected sexual abuse as especially high risk for HIV is unusual and very specific. Any sexual assault would, of course, be considered high risk as it is usually unprotected but, more importantly, an HIV test should be offered to any woman with an undocumented HIV-negative test presenting in the third trimester and we would recommend that this be included in the recommendation.
3	Guideline	87	20	We would recommend the use of the terminology vertical transmission in place of mother-to-child transmission, which women living with HIV find is stigmatising.
4	Guideline	88	3-4	Although rapid HIV testing, i.e. point of care testing may not be available, some laboratories can turn around an HIV test within 60 minutes if the request is urgent and the laboratory is contacted in advance and presented with clinical details. We would recommend, therefore, that this be included in the guideline as an option.

Insert extra rows as needed

**Checklist for submitting comments**

- Use this comment form and submit it as a **Word document (not a PDF)**.
- Complete the disclosure about links with, or funding from, the tobacco industry.
- Include **page and line number (not section number)** of the text each comment is about.
- Combine all comments from your organisation into 1 response. **We cannot accept more than 1 response from each organisation.**
- **Do not paste other tables into this table** – type directly into the table.
- Underline and highlight any confidential information or other material that you do not wish to be made public.
- Do not include medical information about yourself or another person from which you or the person could be identified.
- Spell out any abbreviations you use
- For copyright reasons, comment forms **do not include attachments** such as research articles, letters or leaflets (for copyright reasons). We return comments forms that have attachments without reading them. The stakeholder may resubmit the form without

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attachments, but it must be received by the deadline.

You can see any guidance that we have produced on topics related to this guideline by checking [NICE Pathways](#).

**Note:** We reserve the right to summarise and edit comments received during consultations, or not to publish them at all, if we consider the comments are too long, or publication would be unlawful or otherwise inappropriate.

Comments received during our consultations are published in the interests of openness and transparency, and to promote understanding of how recommendations are developed. The comments are published as a record of the comments we received, and are not endorsed by NICE, its officers or advisory Committees. Further information regarding our privacy information can be found at our [privacy notice](#) on our website.