Results The baseline parameters recorded were, HR 68/min, NIBP 110/50, and SpO₂ 97%.

After 3 doses of epidural LEVOBUPIVAINE 0.2% 10 ML + fentanyl 15 mg and 4 hours later a live 3.5 kg baby was delivered. The procedure remained uneventful.

Conclusions We concluded that the proper preanesthetic evaluation including history, relevant investigations, proper patient positioning both before and after giving neuraxial anesthesia with proper explanation to the patient about the procedure played a key role in successful management of such case by an anesthesiologist.

Background and Aims The Coronavirus Disease 2019 (COVID-19) pandemic has had an unprecedented impact on pregnant women, maternity services and healthcare workers.

Methods Anesthetic information for all anesthetic interferences in covid 19 pregnant patients undertaken at our unit between April 1, 2020 and March 31, 2022 was reviewed from electronic records. No ethical approval was needed as the review was classed as an audit as per the Royal College of Anaesthetists (RCoA) standards. The deliveries were collected with the type of anesthesia, the patients were admitted to the Intensive Unit and to Department for surveillance and operations in pregnant covid patients.

Results From these data, the cesarean sections classified as category 2–3 and completed without general anesthesia. The mortality was 1 patient in 2022 and unfortunately >90% of pregnant covid were without vaccination. Use of spinal anesthesia should be the preferred method of anesthesia for all these patients with cesarean section. The only argument with the World Health Recommendations is the absence of epidural anesthesia in natural childbirth except for 1 case in March 2022.

Conclusions Strategies to reduce the rate of general anesthesia for emergent cesarean delivery have included (1) heightened communication between obstetrical, nursing, and anesthesia teams and (2) early neuraxial labor analgesia with a well-functioning epidural catheter. It is important for the obstetric anesthesiologists when treating infected pregnant to follow national recommendations or guidelines and help anesthesia providersto prepare themselves to manage future pandemics.