

COVID-19 Effects on Pregnant and New Mothers, Infants and Children

Part 1 of 3: COVID-19 Effects on Pregnant and New Mothers

Little is currently known about COVID-19 in pregnant women or their newborns. Most information is coming from small studies and observations in China. The U.S. Centers for Disease Control and Prevention (CDC) held an [emergency informational call for clinicians on 3/12/20](#) to provide guidelines for the care pregnant women and their infants.

Here are key points from the CDC on how COVID-19 affects pregnant women and their infants:

- **The CDC considers pregnant women to be at higher risk for COVID-19**, because earlier coronaviruses, (SARS, MERS) led to pregnancy loss and birth defects in some women. Plus, expectant moms are at higher risk for infection, generally, due to the physical and immunity changes in their bodies during pregnancy.
- **COVID-19 symptoms in pregnant women, infants and older children are the same as those in adults.** The most common being cough and fever. Other symptoms include congestion, significant mucus, sore throat and even vomiting and diarrhea.
- **There is no evidence that a pregnant woman with COVID-19 can infect her fetus or that a breastfeeding mother with the virus can infect her baby through breast milk.** COVID-19 seems to spread through respiratory droplets from coughs and sneezes. It has not appeared in the breast milk of lactating mothers.
- **Pregnant women with or without the virus should still attend all prenatal appointments.** Those with confirmed or suspected COVID-19 should alert their healthcare providers. Providers should take precautions during appointments—having these women wear a face mask, evaluating them in separate, closed-door exam rooms, and following infection prevention and control measures.
- **Pregnant women can protect themselves with the same strategies as everyone else:**
 - Frequent hand-washing (20 seconds or more) with soap and water—or alcohol-based hand sanitizer if soap and water aren't available
 - Avoiding large crowds
 - Staying home if sick and avoiding people who are sick
- **It isn't known yet whether a person can be re-infected with the virus after contracting it.** The CDC is aware of reports of possible re-infection, but information is limited. It is known that a person cannot be re-infected for a short period after recovery.

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Part 2 of 3: Handling Pregnant, Laboring and Postpartum Women in Inpatient Settings

In an [emergency informational call for clinicians on 3/12/20](#), the U.S. Centers for Disease Control and Prevention (CDC) outlined procedures for treating pregnant, laboring and postpartum women with confirmed or suspected COVID-19 and their newborns in inpatient settings. You can find the key points below:

- **Pregnant women with confirmed or suspected COVID-19 should notify the birthing facility—or have EMS personnel do so—before arrival** so the facility can prepare by identifying the best room for a private labor and delivery, informing care personnel, and ensuring infection prevention and control supplies are ready, etc.
- **Obstetric staff should be trained in infection prevention and control**, including the prompt notification of infection control personnel at their facility of the anticipated arrival of a patient with confirmed or suspected COVID-19.
- **Babies born to a mother with the virus should be evaluated regularly for infection**, though there is no evidence of transmission from mother to fetus in utero.
- **Hospitals should consider temporarily separating a mother with confirmed or suspected COVID-19 from her baby** until transmission precautions are discontinued. The care team should discuss the risks and benefits of this with the mother.
- **A separate room should be available for the infant, and visitor limitations should be considered**—with exceptions for a healthy parent or caregiver. Visitors and anyone caring for the infant should wear appropriate protective gear (gown, gloves, face mask, etc.)
- **If the mom and baby will be in the same room**, facilities should consider putting up a curtain or screen between them and keeping the baby at least 6 feet away from the mother.
- **If no other healthy adult is in the room to care for the infant**, the sick mother should put on a face mask and wash hands (with soap and water for 20 seconds, or alcohol-based hand sanitizer) before each feeding or close contact with the baby.
- **Sick mothers who intend to breastfeed should be encouraged to pump breast milk** and maintain milk supply (using hand hygiene and thoroughly washing and, in some cases, disinfecting the pump and its parts). The expressed milk should be fed to the newborn by a healthy caregiver.
- **Sick moms who wish to breastfeed** should wear a face mask and practice hand hygiene before each feeding.
- **Click for [discharge recommendations](#) for mom and baby, plus [information for healthcare providers](#).**

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Part 3 of 3: COVID-19 Effects on Children

In an [emergency informational call for clinicians on 3/12/20](#), the Centers for Disease Control (CDC) and Prevention provided details on how COVID-19 has affected children and provided guidance for their treatment. You can find the key points below:

- **So far, there has been a very low incidence of known cases of the virus in children**—2% among people under age 20 in China as of early February, though as high as 13% in one Chinese city. Among infants or children with COVID-19 in China, most were infected after being exposed to an adult household member with the virus. Children don't have the same exposures that adults do in work, travel and caregiving, which may explain the low incidence rate.
- **Before testing children for COVID-19**, healthcare providers should consider:
 - Symptoms
 - Circumstances, such as travel history and contact with a confirmed COVID-19 patient
 - Other potential diagnoses for respiratory problems—including the flu.
- **Healthcare providers should limit in-person visits with patients suspected of COVID-19 infection.** Instead, they are advised to use informational calls, nurse triage and telehealth measures to the extent possible, while encouraging families to prepare for potential COVID-19 outbreaks in their communities.
- **To calm fears and anxiety among children, healthcare providers can encourage parents to provide simple information and reassurance**, consider limiting media exposure, correct misinformation, maintain routines as much as possible, and teach children infection prevention strategies, such as handwashing and covering coughs and sneezes.

More information (for providers and parents):

- This American Academy of Pediatrics [video](#) offers helpful tips for healthcare providers
- The CDC's answers to [FAQs about COVID-19 and children](#).

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