

Information for pregnant women and their families

Q1. What effect does coronavirus have on pregnant women?

Generally, pregnant women do not appear to be more likely to be severely unwell than other healthy adults if they develop the new coronavirus. It is expected the large majority of pregnant women will experience only mild or moderate cold/flu like symptoms.

More severe symptoms such as pneumonia appear to be more common in older people, those with weakened immune systems or long-term conditions. As yet, there is no evidence that pregnant women who get this infection are more at risk of serious complications than any other healthy individuals.

If you think you may have symptoms of COVID-19 you should stay at home. If you develop more severe symptoms or your recovery is delayed this may be a sign that you are developing a more significant chest infection that requires enhanced care. Our advice remains that if you feel your symptoms are worsening or if you are not getting better you should contact your primary care physician.

Q2. What effect will coronavirus have on my baby if I am diagnosed with the infection?

As this is a very new virus we are just beginning to learn about it. There is no evidence to suggest an increased risk of miscarriage.

There is also no evidence that the virus can pass to your baby while you are pregnant or during birth (this is called vertical transmission). Two cases of possible vertical transmission have been reported. In both cases, it remains unclear whether transmission was prior to or soon after birth. Another recent report from China of four women with coronavirus infection when they gave birth found no evidence of the infection in their newborn babies. Expert opinion is that the baby is unlikely to be exposed during pregnancy. It is also therefore considered unlikely that if you have the virus it would cause problems with the baby's development, and none have been observed currently.

Some babies born to women with symptoms of coronavirus in China have been born prematurely. It is unclear whether coronavirus caused early labor, or whether it was recommended that the baby was born early in order to preserve the mother's health.

Q3. What can I do to reduce my risk of catching coronavirus?

The most important thing to do is to follow CDC guidelines.

- Pregnant women should do the same things as the general public to avoid infection. You can help stop the spread of COVID-19 by taking these actions:
 - Cover your cough (using your elbow is a good technique)
 - Avoid people who are sick

- Clean your hands often using soap and water or alcohol-based hand sanitizer

You can find additional information on preventing COVID-19 disease at CDC's ([Prevention for 2019 Novel Coronavirus](#)).

Q4. Why are pregnant women in a vulnerable group?

Pregnant women were placed in a vulnerable group by the CDC. This means you have been advised to reduce social contact through social distancing measures.

Based on the evidence we have so far, pregnant women are still no more likely to contract coronavirus than the general population. What we do know is that pregnancy in a small proportion of women can alter how your body handles severe viral infections. This is something that midwives and obstetricians have known for many years and are used to dealing with. As yet, there is no evidence that pregnant women who get this infection are more at risk of serious complications than any other healthy individuals.

What has driven the decisions made by officials to place pregnant women in the vulnerable category is caution. We know that some viral infections are worse in pregnant women. At the moment, there's no evidence that this is the case for coronavirus infection, but the amount of evidence available is still quite limited.

Q5. What do I need to do now?

As a precaution, you should follow government advice about social distancing; stay away from public places and avoid anyone who has symptoms suggestive of coronavirus.

Q6. Can I still go to work? What if I work in a public-facing role?

We understand that it must be an anxious time if you are pregnant and you work in a public facing role, pregnant women should minimize social contact as a precautionary measure.

Pregnant women who can work from home should do so. If you can't work from home, if you work in a public-facing role that can be modified appropriately to minimize your exposure, this should be considered and discussed with your occupational health team or employer.

Q7. What is the advice if I am a healthcare worker and pregnant?

You should practice social distancing, but can continue to work in a patient-facing role, provided the necessary precautions are taken.

You should avoid, where possible, caring for patients with suspected or confirmed coronavirus infection. If this is not possible, you should use personal protective equipment (PPE) and ensure a thorough risk assessment is undertaken.

Some working environments, such as the OR, respiratory wards and intensive care/high dependency units, carry a higher risk for all pregnant women of exposure to the virus and all healthcare workers in these settings are recommended to use appropriate PPE.

Q8. Should I attend my antenatal appointments?

Attending antenatal and postnatal care when you are pregnant and have a new baby is really important to ensure the wellbeing of you and your baby.

If you are well, you should attend your antenatal care as normal. If you have symptoms of possible coronavirus infection, you should contact your provider to discuss postponing your routine visits until after the isolation period is over.

At this time, it is particularly important that you help your maternity team take care of you. If you have had an appointment cancelled or delayed, and are not sure of your next contact with your maternity team, please let them know by contacting their office.

The following practical advice may be helpful:

- If you have a routine scan, appointment or visit due in the coming days, you will still need to attend, but the appointment may change due to staffing requirements.
- Some appointments may be conducted on the telephone or using videoconferencing, provided there is a reasonable expectation that maternal observations or tests are not required.
- If you miss an appointment and haven't heard from your provider, please contact them to rearrange the appointment.

Whatever your personal situation please consider the following:

- If you have any concerns, you will still be able to contact your provider, but please note they may take longer to get back to you
- If you have an urgent problem related to your pregnancy, but not related to coronavirus, get in touch using the same contact details you already have.
- If you have symptoms suggestive of coronavirus contact your provider and they will arrange the right place and time to come for your visits.
- At this time, we are asking that you do not bring anyone to your visits with you. The exception would be your first ultrasound and your anatomy ultrasound at 20 weeks.
- There may be a need to reduce the number of antenatal visits. This will be communicated with you. Do not reduce your number of visits without discussing this with your provider.

Q9. What is the travel advice if I am pregnant?

Please limit travel outside of the city to that which is unavoidable.

Q10. What should I do if I think I may have coronavirus or been exposed?

If you are pregnant and you have either:

- a high temperature
- a new, continuous cough

You should stay at home for 7 days. Do not go to a PCP, pharmacy, or hospital. You do not need to contact your provider to tell them you are staying at home. You do not need a test for coronavirus. At the present time, only people with severe symptoms who require overnight admission to hospital will be tested.

You should contact your Ob/Gyn to inform them that you have symptoms suggestive of coronavirus, particularly if you have any routine appointments in the next 7 days.

You should contact your primary care if:

- you feel you cannot cope with your symptoms at home
- your condition gets worse
- your symptoms do not get better after 7 days

If you have concerns about the wellbeing of yourself or your unborn baby during your self-isolation period, contact your Ob/Gyn. They will provide further advice, including whether you need to go to the hospital.

Q11. How will I be tested for coronavirus?

The process for diagnosing coronavirus infection is changing rapidly. At the current time, only people with severe symptoms who require at least overnight admission to hospital will be tested.

If you do require a test, you will be tested in the same way as anyone being tested, regardless of the fact that you are pregnant. Currently, the test involves swabs being taken from your mouth and nose. You may also be asked to cough up sputum, a mixture of saliva and mucus.

Q12. What should I do if I test positive for coronavirus?

If you test positive for coronavirus, you should contact your Ob/Gyn to make them aware of your diagnosis. If you have no symptoms, or mild symptoms, you will be advised to recover at home. If you have more severe symptoms, you might be treated in a hospital setting.

Q13. Why would I be asked to self-isolate (as opposed to reducing social contact)?

You may be advised to self-isolate because:

- You have symptoms of coronavirus, such as a high temperature or new continuous cough
- You have tested positive for coronavirus and you've been advised to recover at home

Q14. What should I do if I'm asked to self-isolate?

Pregnant women who have been advised to self-isolate should stay indoors and avoid contact with others for 7 days. If you live with other people, they should stay at home for at least 14 days, to avoid spreading the infection outside the home.

Q15. Can I still attend my antenatal appointments if I am in self-isolation?

You should contact your Ob/Gyn to inform them that you are currently in self-isolation for possible/confirmed coronavirus and request advice on attending routine antenatal appointments.

It is likely that routine antenatal appointments will be delayed until isolation ends. If your doctor advises that your appointment cannot wait, the necessary arrangements will be made for you to be seen.

Q16. Will being in self-isolation for suspected or confirmed coronavirus affect how I give birth?

There is currently no evidence to suggest you cannot give birth vaginally or that you would be safer having a caesarean birth if you have suspected or confirmed coronavirus, so your birth choices should be respected and followed as closely as possible based on your wishes.

However, if your respiratory condition (breathing) suggests that your baby needs to be born urgently, a caesarean birth may be recommended.

There is no evidence that women with suspected or confirmed coronavirus cannot have an epidural or a spinal block.

Q17. What happens if I go into labor during my self-isolation period?

If you go into labor, you should call Labor and Delivery for advice, and inform them that you have suspected or confirmed coronavirus infection.

If you have mild symptoms, you will be encouraged to remain at home (self-isolating) in early labor, as per standard practice.

Your maternity team have been advised on ways to ensure that you and your baby receive safe, quality care, respecting your birth choices as closely as possible.

When you and your maternity team decide you need to attend the maternity unit, general recommendations about hospital attendance will apply:

- You will be advised to attend hospital via private transport where possible, or call 911 for advice, as appropriate
- You will be met at the maternity unit entrance and provided with a surgical face mask, which will need to stay on until you are isolated in a suitable room
- Coronavirus testing will be arranged

Q18. Could I pass coronavirus to my baby?

As this is a new virus, there is limited evidence about caring for women with coronavirus infection in women who have just given birth. A small number of babies have been diagnosed with coronavirus shortly after birth, but it remains unclear whether transmission was prior to or soon after birth. Expert opinion is that the baby is unlikely to be exposed during pregnancy.