

# COVID-19 & PREGNANCY



While we are learning more every day, there is still limited information on the effects of COVID-19 on pregnant women and their babies. Below is general guidance on COVID-19 as it relates to pregnancies; however, we advise you consult with your OB provider for the most current guidance and recommendations on specific aspects of your pregnancy.

## FAQS

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### **If I am pregnant, am I more likely to get COVID-19? If I get it, will I be sicker than women who are not pregnant?**

No, it does not appear pregnant women are more likely to be infected. While some pregnancy-related changes to your immune system and lungs may make severe respiratory diseases worse, it does not appear that COVID-19 has a worse course in pregnant women.

### **How might COVID-19 affect my pregnancy?**

Currently, we do not know if COVID-19 causes problems during pregnancy or if COVID-19 affects the health of the baby after birth.

In studies, pregnancies with other coronavirus infections (e.g. SARS-CoV) did not have increased rates of miscarriage or stillbirth. However, other viral respiratory infections, like influenza, have been associated with low birth weight and preterm birth. A small study on COVID-19 suggested an increased risk of preterm birth. Lastly, while high fevers early in pregnancy may increase the risk of certain birth defects, it does not appear that COVID-19 directly causes birth defects.

- Make social distancing a priority. Keep at least 6 feet away from others.
- Wash your hands often for at least 20 seconds. If soap is not available, use hand sanitizer with at least 60% alcohol.

- Avoid touching your face, eyes, nose and mouth with unwashed hands.
- Stay home, especially if you are sick.
- Limit going out of the house to only essential trips (e.g. groceries).
- Work from home/remotely if able.

As COVID-19 becomes more prevalent, there may be advantages to modifying traditional prenatal care. You may consider discussing alternative prenatal care with your OB provider. That may include either spacing out appointments or creating alternate prenatal schedules. Any modification should be a personal choice that emphasizes a patient's desire to limit the risk of exposure to the virus for the mother and the fetus or infant.

### **What can I expect when I arrive for my visit? What is the visitor policy?**

While screening policies and procedures are subject to change as new information evolves, you will be screened upon entry to the building/hospital for your visit. Visitor policies are adapting to best control the spread of COVID-19.

### **Could I transmit COVID-19 to my baby during pregnancy or delivery?**

In limited published cases, no infants born to mothers with COVID-19 tested positive for the virus immediately after birth. Additionally, the virus has not been detected in samples of amniotic fluid or breast milk.

However, newborns as young as a few days old have been diagnosed with COVID-19, suggesting that a mother can transmit the virus to her infant through close contact after delivery.

**Is it safe for me to deliver at a hospital where there have been COVID-19 cases?**

Yes. The Children’s Hospital at OU Medicine is taking great precautions to keep our patients and our healthcare providers safe. There are specific isolation rooms for pregnant patients with COVID-19 or suspected COVID-19 in order to make all deliveries as safe as possible.

**What if my OB gets COVID-19?**

If your OB provider tests positive for COVID-19, she or he will need to be quarantined until no longer at risk of transmitting the virus. Most of our OB providers function as a group practice. This means even if your physician gets COVID-19, you will have excellent providers to help bring your baby into the world.

If you were potentially exposed, you will be contacted regarding any additional safety measures needed for you and your family.

**Do I need to be separated from my newborn if I have COVID-19? Will my baby be kept in quarantine?**

If you have recently tested positive for COVID-19 or are considered under investigation for COVID-19, your healthcare team will discuss separating you from your baby to decrease the risk of transmission to the baby. This would last until you are no longer at risk of transmitting the virus. Breastfeeding is encouraged, and there is no evidence of virus transmission in breast milk. Using a breast pump allows for optimal nutrition and minimizes infant exposure.

Obviously, this is far from the ideal way to welcome a new baby to your family. If you decline a period of separation and elect to co-locate (also referred to as “rooming in”) with your baby, we encourage wearing a facemask and gloves and to practice hand hygiene before every feeding.

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\*Disclaimer: The COVID-19 pandemic is an evolving challenge. The data and recommendations are changing rapidly as healthcare professionals attempt to best care for both unaffected and affected pregnancies. While the information on this site will be updated with new information, please realize that we are a healthcare team working on the front line caring for all pregnancies.\*

