

May 14, 2020

To: Neonatal Providers, & Obstetrical Providers, Illinois Birthing Hospitals, and the Illinois Hospital Association (IHA)

From: Illinois Department of Public Health Perinatal Advisory Committee

RE: Obstetrical & neonatal care during the COVID-19 pandemic

Dear Hospitals, Providers, and the IHA,

At the recent Illinois Department of Public Health (IDPH) Perinatal Advisory Committee (PAC) meeting several emerging challenges were raised regarding the care of pregnant women and their newborn infants in Illinois during the current COVID-19 pandemic. Of particular concern is the recent closure of maternity services at hospitals across Illinois (seven in 2020 to date) which serve populations with a significantly increased pregnancy-related mortality risk relative to the rest of the state. Additional concerns include universal access to routine prenatal visits, a birthing process that is safe for both patients and health care providers, use of personal protective equipment (PPE), adequate COVID-19 testing to identify both symptomatic and asymptomatic persons, and appropriate outpatient post-partum follow-up for mothers and newborns that includes provision of necessary supplies for home monitoring of medical conditions (e.g. a blood pressure cuff for women with hypertension).

The IDPH PAC feels it is imperative that all pregnant women and their babies have access to safe high-quality care before and after birth consistent with well-established standards from the American College of Obstetrics and Gynecology and the American Academy of Pediatrics. These standards pertain to prenatal visits, assessment of fetal well-being during labor, safe delivery, appropriate in-hospital postnatal care of the mother and newborn, and timely outpatient follow-up. In addition, the PAC recommends universal testing of all women for COVID-19 upon admission to the labor and delivery unit (as testing availability allows), shared decision making between women and providers during the birth hospitalization that includes patient education regarding COVID-19 risks, inclusion of a support person during labor and delivery, and provision of appropriate PPE for all pregnant women, their support person, and hospital providers. Suggestions from the IDPH PAC for newborn care include the following: early discharge <24 hours after birth is discouraged; discharge 24 – 48 hours after birth should only occur if the newborn meets the hospital's standard criteria for safe discharge (e.g. adequate oral intake, documented passage of meconium, stable cardiorespiratory status, normothermia in an open crib, weight loss that is not excessive, a safe home environment) and a follow-up visit has been scheduled for 48 – 72 hours after discharge; and completion of all routine screening tests prior to discharge (e.g. blood testing for metabolic diseases, congenital heart disease screening, hyperbilirubinemia, newborn hearing). Local hospital and outpatient providers should be mindful that early discharge of late preterm infants, low birth weight infants, or infants born to COVID positive mothers may increase their risk for complications. The IDPH PAC recommends these infants be monitored closely in the first weeks after discharge. Telemedicine may be helpful for ongoing follow-up of these patients, but does not replace the in-person provider assessment 48 – 72 hours after discharge.

The links below contain important resources regarding the perinatal care for women and their babies as well as COVID-19 testing and appropriate use of PPE:

- Centers for Disease Control: <https://www.cdc.gov/coronavirus/2019-ncov/hcp/inpatient-obstetric-healthcare-guidance.html>

- American College of Obstetrics and Gynecology: <https://www.acog.org/>
- Society for Maternal Fetal Medicine: www.smfm.org/covid19
- American Academy of Pediatrics: <https://downloads.aap.org/AAP/PDF/COVID%2019%20Initial%20Newborn%20Guidance.pdf>
- Illinois Masks for Moms Initiative: publichealth.uic.edu/news-stories/masks-for-moms-helping-moms-stay-safe/

Regards,

Illinois Department of Public Health Perinatal Advisory Committee