

Management of Newborns born to Women with Suspected or Proven COVID-19 Infection **(Effective March 29 PM, 2020)**

Background. It is unknown whether newborns with COVID-19 are at increased risk for severe complications but none have been reported to date. Transmission after birth via contact with infectious respiratory secretions remains a potential concern. CDC recommends that infants born to mothers with confirmed COVID-19 should be considered persons under investigation (PUIs) as possibly COVID-19 infected and be subject to isolation precautions used for patients with COVID-19.

Placement of newborns to women with suspected (person under investigation, PUI) or proven COVID-19 infection. Although recommended isolation precautions currently include placement in a negative pressure airborne isolation room (AIR) there is very little capacity in the newborn nurseries and neonatal intensive care units (NICUs) in Northwell facilities. Therefore, in most circumstances when an airborne isolation room is not available for the baby, newborns will either been placed in private rooms in nurseries or NICUs (or pediatric units if necessary) or be placed in an airborne isolation room with the baby's mother. Please see the figure for recommended placement strategies that depend on the medical care needs of the baby and the clinical status of the mother (Figure). A practice of having a healthy baby room-in with an asymptomatic mother is reasonable and acceptable with appropriate 6 foot distancing and mother and baby, PPE use, and education of mother, considering the baby will be discharged with the mother and this practice presents an opportunity for the mother to be educated in infection prevention practices while caring for the baby at home. Should a mother with symptomatic COVID-19 infection insist upon having the baby rooming in, a discussion with the mother will ensue with an attending neonatologist/newborn hospitalist and infectious diseases/infection control to decide on the most appropriate management and accommodation. Each facility will need to operationalize these guidelines based on the physical layout. If the volume of babies born to women who are COVID-19 positive or are PUI outstrips the single room availability, they can be cohorted provided a 6 foot distance can be maintained between babies.

COVID-19 Testing of Babies. Babies born to COVID-19 positive women should be tested at 24 hours of age with a single swab used to sample both nasopharyngeal and oropharyngeal sites. For babies born to PUI mothers with COVID-19 test results pending, suggest to wait for maternal results because if negative, testing of baby is not indicated.

PPE in caring for babies who are PUIs. The appropriate PPE for these babies are the same as for other patients who are PUIs: gloves, gowns, N95 mask covered by procedure mask (or surgical/procedure mask if N95 is not available), and eye protection with a face shield or goggles. For babies who are rooming in with their mothers, the newborn should be placed ≥ 6 feet away from the mother. Healthcare personnel should doff and then don new PPE (discarding the procedure mask and preserving the N95 respiratory mask for re-use) after caring for mother if they will then care for baby. For babies who remain hospitalized, baby should continue to be managed as a PUI. The baby should be retested at 12-14 days of age and sooner if the baby develops symptoms of illness or a negative change from their baseline status. A tentative recommendation is that precautions can be discontinued at age 14 days if clinically stable and the repeat COVID-19 testing (performed at day 12-14 of life) is negative.

Maternal baby contact. A mother with confirmed COVID-19 or who is a PUI should take all possible precautions to avoid spreading the virus to her infant, including washing her hands before touching the infant and wearing a face mask while handling or feeding the infant. Skin-to-skin is not permitted. Mothers with COVID-19 infection or those who are a PUI are not permitted to enter the nursery, NICU, or other pediatric unit until they are no longer on isolation precautions.

Breast feeding. In limited case series reported to date, no evidence of virus has been found in the breast milk of women with COVID-19. No information is available on the transmission of the virus that causes COVID-19 through breast milk (i.e., whether infectious virus is present in the breast milk of an infected woman). Therefore, breast milk can be fed to infants with expressed breast milk from symptomatic mothers and asymptomatic women can directly breast feed with appropriate precautions. The mother should wash her hands before touching the infant and wear a face mask while handling or feeding the infant. If expressing breast milk with a manual or electric breast pump, a dedicated breast pump should be provided and the mother should wash her hands before touching the pump or bottle parts. After each pumping session, all parts that come into contact with breast milk should be thoroughly washed and the entire pump should be appropriately disinfected per the manufacturer's instructions. Generally, a healthy caregiver other than the mother should feed the expressed breast milk to the infant. For babies requiring care in a NICU (or another inpatient site) a breast pump may be loaned to the patient's mother. When no longer is use, the hospital should clean the breast pump following established protocols, after which the breast pump can be used for another patient.

Visitation policy. Visitors to the baby will be limited to one healthy parent or caregiver and as per institutional visiting policy. Visitors will be instructed to wear appropriate PPE, including gown, gloves, face mask, and eye protection during visitation and if present to provide care (e.g., diapering, bathing) and feeding for the newborn. For healthy family members, appropriate PPE includes gown, gloves, face mask, and eye protection. Refer to the facility's visitation protocol.

Discharge. Babies of COVID-19-positive women continue to be classified as PUIs after hospital discharge and precautions should be maintained at the baby's home as for any other PUI. A tentative recommendation is that precautions can be discontinued at age 14 days if newborn COVID-19 test was negative and patient is clinically stable. Testing of ambulatory babies is indicated only if the baby becomes symptomatic or was positive when tested at birth-24 hours of age. . Prior to discharge it is important for efficient communication to the pediatric office where the baby will be seen to inform them the baby is a PUI. Should the pediatric office feel unequipped to see the baby, e.g., because of insufficient PPE, there are Northwell pediatric practices in throughout our region (Table 2.) including at the General Pediatrics Divisional Office at 410 Lakeville Rd, New Hyde Park, that are equipped and willing to see these neonates until they are 14 days of age and no longer PUIs.*

* Please contact David Fagan, MD, Vice Chairman, Pediatric Ambulatory Administration, Cohen Children's Medical Center @ dfagan@northwell.edu for questions about the participation of pediatric practices.

Figure. Placement of Newborn of COVID-19-positive woman

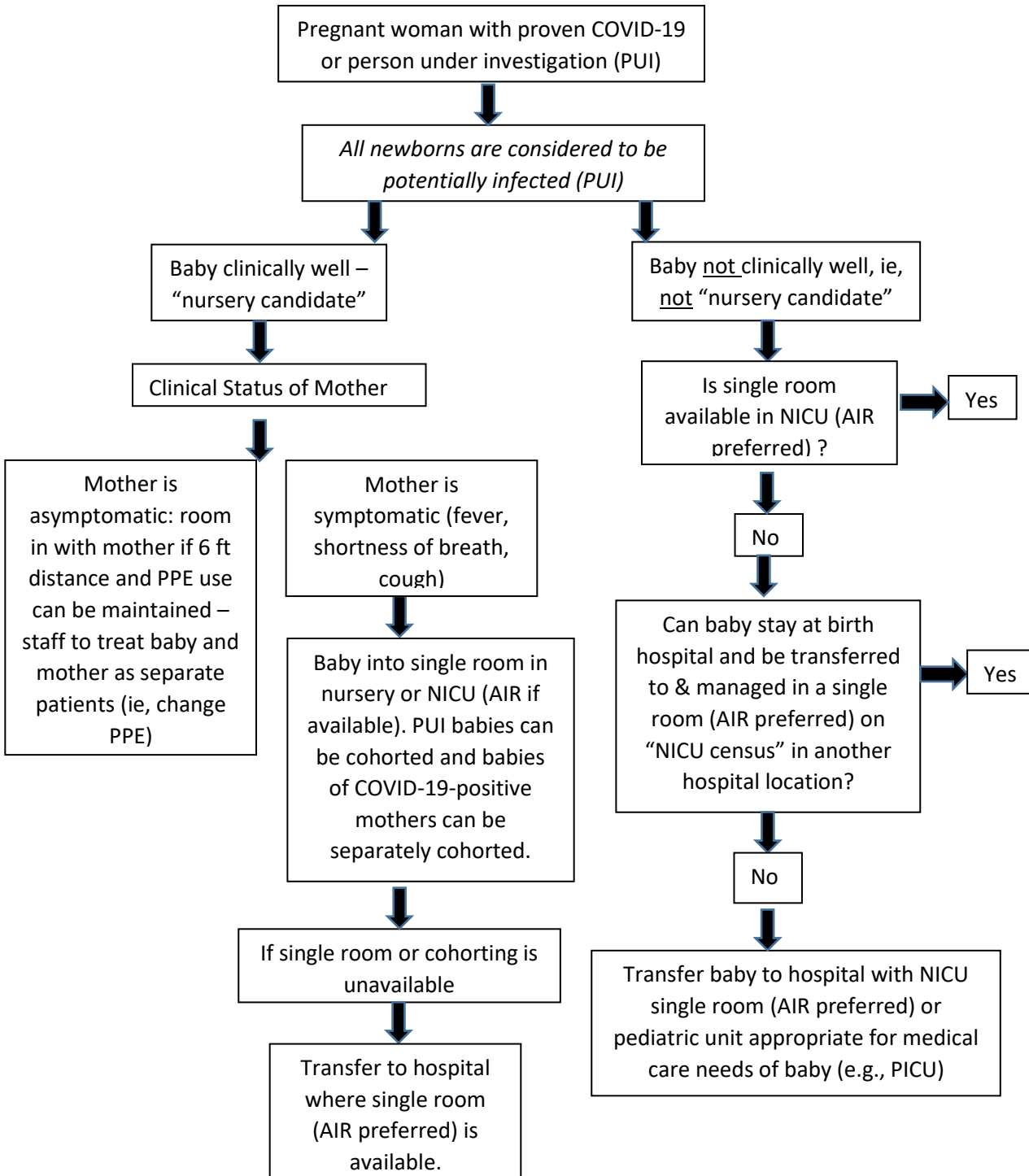


Table 1. CCMC-Northwell Pediatric Practices who will Evaluate Newborns who are PUIs

| Practice Name | Address | City | COVID-19 Hours |
|------------------------------|--|------------------|--------------------------------------|
| Gen Peds at Astoria | 23-25 31st Street, Suite 302 | Astoria | M-F 9-5/ S 9am-2pm |
| Gen Peds at Bayside | 200-14 44th Avenue | Bayside | M-F 9-5/ S 9am-2pm |
| Gen Peds at East Patchogue | 285 Sills Road, Building 9A | East Patchogue | M/T 9-6, W/Th 8:30-5/ F 9-5p/S 9-12p |
| Gen Peds at Garden City | 877 Stewart Avenue, Suite 33 | Garden City | M-F 9-5/ S 8-12/ Sun On Call |
| Gen Peds at Glen Cove | 10 Medical Plaza, Suite 301 | Glen Cove | M-F 8-5/S 8-12 |
| Gen Peds at Hewlett | 1575 Broadway | Hewlett | M-F 8:30-5/S 9-12 |
| Gen Peds at Howard Beach | 158-49 84th St. | Howard Beach | M-F 9-5p/S 9-2p/ Sun Closed |
| Gen Peds at Huntington | 241 East Main Street | Huntington | M-F 8-6/Sat 8-12/ Sun 9-12 |
| Gen Peds at Islandia | 3001 Expressway Drive North, Suite 100 | Islandia | M-F 9-5/S+S 9-1 |
| Gen Peds at Kew Garden Hills | 144-02 Jewel Ave | Kew Garden Hills | M-Th 9-6/F 10-2/ Sun 10-1 |
| Gen Peds at Levittown | 2920 Hempstead Turnpike | Levittown | M-F 8:30-5/S 9:00-12 |
| Gen Peds at Massapequa | 504 Hicksville Road | Massapequa | M-Th 8:30-5/F 9-5/ Sat 9-12 |
| Gen Peds at Mill Basin | 5723 Avenue N | Mill Basin | Go-Live 3/23 |
| Gen Peds at Mineola | 156 1st Street | Mineola | M-Th 8:30-7/F 9-5/ Sat 9-12 |
| Gen Peds at Mount Sinai | 5505 Nesconset Hwy | Mount Sinai | M-F 9-5/S 9-1P |
| Gen Peds at North Babylon | 990 Deer Park Avenue | North Babylon | M-F 9-5/S 9-2 |
| Gen Peds at Rego Park | 95-25 Queens Blvd | Rego Park | M-F 9-5/S 9am-2pm |
| Gen Peds at Rockville Centre | 100 Merrick Ave, Suite 102E | Rockville Centre | M-F 9a-5/S 9a-12 |
| Gen Peds at 410 | 410 Lakeville Road, Suite 108 | New Hyde Park | N/A |