



# Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



## HOW YOU CAN SLOW THE SPREAD OF COVID-19

### Take care of others by taking care of yourself.

Wash your hands, don't touch your face, and stay home if you are sick.

### Stay at Home and Physically Distance

Stay at home whenever you can. Maintain 2 meters distance from those outside of your household.

## Guideline for the Care of Pregnant Women/Individuals Who Are Confirmed or Suspect Cases of COVID-19 in Community Settings

Updated: Sept. 4, 2020

*Knowledge is changing rapidly and therefore information below may be modified in response to new information and evidence. See Summary of Updates below for the latest changes in recommendations.*

### Site Applicability:

Sites in British Columbia that deliver health care to pregnant women/individuals within hospital units and community settings. This document is intended for antenatal care in the community.

### General Information:

- SARS-CoV-2 is a novel coronavirus that causes COVID-19 illness in adults and children. In the context of a global COVID-19 pandemic, B.C. has implemented a number of public health measures to prevent the spread of SARS-CoV-2.
- Pregnant women/individuals are not at more risk of acquiring SARS-CoV-2, nor at more risk of getting severe disease than comparable aged adults.
- Pregnancy Outcomes with Confirmed COVID-19: To date, information is available of about 60 cases of pregnant women with confirmed COVID-19 in China. The pregnancy outcomes have been reported to be good overall, with spontaneous and iatrogenic preterm labour being the most reported adverse pregnancy outcomes.
- COVID-19 virus has a very low infection rate in children estimated at 1-5% worldwide.
- The majority of cases in children are the result of a household transmission by droplet spread from another family member with symptoms of COVID-19.
- **Vertical Transmission: Within the small cohort referred to in previous statement there is no strong evidence of vertical transmission at this point.**
- Teratogenicity: There is currently no reported increased risk of congenital anomaly, though the number of reported cases is small.
- COVID-19 virus has a very low infection rate in children estimated at 1-5% worldwide. The majority of cases in children are the result of a household transmission by droplet spread from another family member with symptoms of COVID-19.

April 15, 2020

CRG 19 Guideline for the Care of Pregnant Women/Individuals Who Are Confirmed or Suspect Cases of COVID-19 in Community Settings



Ministry of Health



BC Centre for Disease Control

**If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.**

Non-medical inquiries (ex. travel, physical distancing): 1-888-COVID19 (1888-268-4319) or text 604-630-0300



## Definitions

- COVID-19 disease categories as used in this document:
  - Confirmed case: woman has laboratory result confirmation for SARS-CoV-2.
  - Suspect case: woman who has become symptomatic of a viral illness and COVID-19 is a part of the differential diagnosis and testing has been sent
  - Contact: woman is asymptomatic but was exposed to a Health Care Provider or family member who has become symptomatic for or diagnosed with COVID-19, for example, an infant who is asymptomatic born to a woman who is a confirmed or suspect case of COVID-19 is classified as contact.
- IPAC: Infection Prevention and Control

## Additional information:

- For the most up to date information on PPE please refer to BCCDC Personal Protective Equipment document: <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/infection-control/personal-protective-equipment>
- For most up to date information aerosol generating medical procedures please refer to: [http://www.bccdc.ca/Health-Professionals-Site/Documents/AGMPs\\_requiring\\_N95.pdf](http://www.bccdc.ca/Health-Professionals-Site/Documents/AGMPs_requiring_N95.pdf)

## Overall Principles:

- Antenatal patients with mild COVID-19 symptoms should stay at home in self-isolation when possible. Most individuals will only experience mild or moderate cold or influenza-like symptoms. Refer to the BCCDC resource for self-isolation: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/about-covid-19/if-you-are-sick>
  - People that test positive for SARS-CoV-2, must self-isolate at home until:
    - At least 10 days have passed since the onset of symptoms; AND
    - Fever has resolved without the use of fever-reducing medication; AND
    - Symptoms (respiratory, gastrointestinal, and systemic) have improved
  - People that test negative for SARS-CoV-2, must self-isolate at home until:
    - Resolution of fever without the use of fever-reducing medication; AND
    - Improvement in symptoms (respiratory, gastrointestinal, and systemic): AND
  - People who are not tested for SARS-COV-2 must self-isolate at home until:
    - At least 10 days have passed since the onset of symptoms; AND
    - Fever has resolved without the use of fever-reducing medication; AND
    - Symptoms (respiratory, gastrointestinal, and systemic) have improved
  - Members of the general public who are identified by public health officials as close contacts of confirmed COVID-19 cases, must self-isolate for 14 days to ensure the full incubation and infectious period has passed
- Care should be carried out by telephone or other virtual health options.
- Visitors to the patient's home should be kept to a minimum.
- Delivering hospital and primary care provider should be informed if there is a confirmed case of COVID-19 pregnant woman in the community.
- Consult Reproductive Infectious Disease at BC Women's Hospital when there is a pregnant woman with confirmed COVID-19 infection (page BC Women's: 604-875-2161).



- Confirmed COVID-19 status in pregnancy alone is NOT a reason for admission to hospital. Need for higher level of care for respiratory condition or routine OB care for labour are the only indications for admission. The majority of individuals can be managed in community.

#### Antenatal Patients:

- Pregnant women should be advised **NOT** to come to hospital unless they need urgent obstetric or medical care
- All antenatal patients should be told that if they are concerned about their symptoms or require urgent medical advice, they should contact their primary Obstetrical Care Provider ***by phone or 811***.
  - Refer to the BC COVID-19 Assessment Tool to help determine whether they may need further assessment or testing: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/about-covid-19/if-you-are-sick>
- If a pregnant woman/individual is advised to come to the hospital, they should be told to come by private car, not to call EMS and not to use public transport, taxi or rideshare. If they do not have access to private car and there are no other option in your community, EMS may be necessary. They should call the unit before entering the hospital and self-identify as being a confirmed case of COVID-19 and/or having respiratory symptoms. Advise patient to wear a face mask.
- Any enhanced fetal surveillance during the acute illness for confirmed COVID-19 cases is based on the clinical condition of the pregnant individual and should be performed after consultation with the Reproductive ID Team at BC Women’s Hospital.
- When a pregnant patient is:
  - At least 10 days passed the onset of symptoms; AND
  - Fever has resolved without the use of fever-reducing medication; AND
  - Symptoms (respiratory, gastrointestinal, and systemic) have improved

They should be offered an US for growth. Some individuals who have had the COVID-19 virus continue to have a dry cough for several weeks and are not considered infectious.

- Routine antepartum fetal surveillance of confirmed COVID-19 cases should occur monthly and include fetal ultrasound assessment for growth.
- **Admission is only necessary when individuals meet criteria for admission for medical reasons.**
- If medical admission needs to take place for a pregnant patient with confirmed COVID-19 status they should be admitted on a medical unit unless delivery is anticipated.

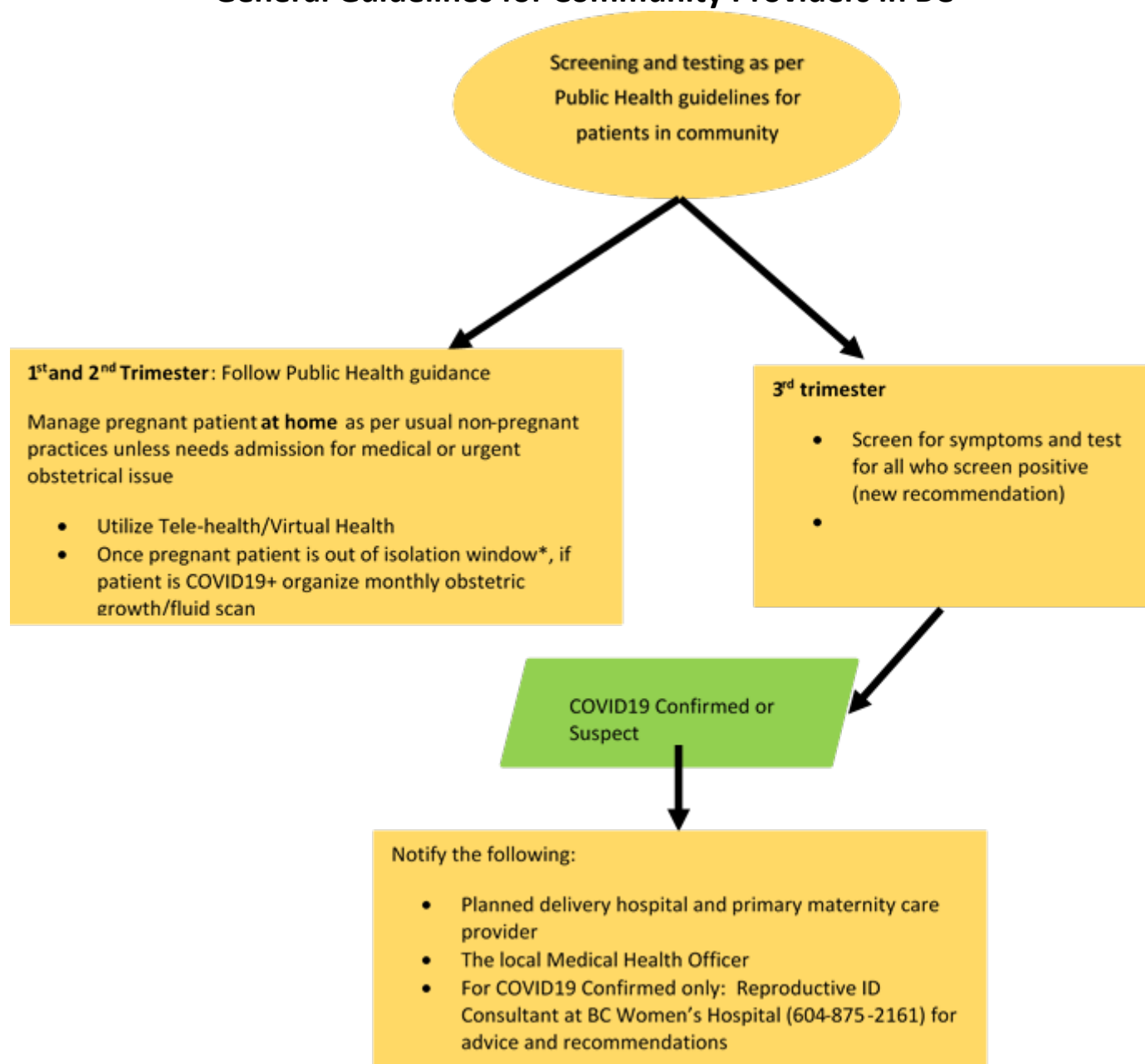
#### References:

1. SOGC, Committee Opinion March 14, 2020 <https://www.sogc.org/en/content/featured-news/Updated-SOGC-Committee-Opinion%E2%80%9320COVID-19-in-Pregnancy.aspx>
2. RCOG: Coronavirus Infection in Pregnancy – Guideline for Healthcare Providers, March 13, 2020 <https://www.rcog.org.uk/globalassets/documents/guidelines/coronavirus-covid-19-infection-in-pregnancy-v2-20-03-13.pdf>  
<https://sogc.org/en/content/featured-news/Updated-SOGC-Committee-Opinion%E2%80%9320COVID-19-in-Pregnancy.aspx>



# Pregnant Women/Individuals Who Are Confirmed or Suspect Cases of COVID-19

## General Guidelines for Community Providers in BC



\*Isolation window:

- Anyone that tests positive for COVID-19, must self-isolate at home for a minimum of 10 days from symptom onset AND symptoms, including fever, have completely resolved
- Anyone that tests negative for COVID-19, must self-isolate at home until common cold or influenza like symptoms have completely resolved
- Any member of the general PUBLIC that is considered a CLOSE CONTACT of a confirmed COVID-19 case, must self-isolate for 14 days to ensure the full incubation and infectious period has passed.

