SOGC Recommendations: COVID-19 and Pregnancy

Pregnant woman with COVID-19 exposure

Symptomatic

- COVID-19 status: Positive or unknown
  - Use droplet/contact precautions
  - Consider hospital admission if medically indicated*

- Antepartum
  - Maternal surveillance, including vital signs as indicated by severity, and/or obstetric early warning protocol
  - Fetal surveillance, including monthly ultrasounds for fetal anatomy, fluid, and fetal fetal growth

- Intrapartum
  - Timing and mode of delivery governed by obstetric indications
  - Droplet/contact precautions
  - Consider personal protective equipment and N95 respirator if cesarean delivery due to possibility of intubation
  - Delayed cord clamping*

- Postpartum
  - Continue droplet/contact precautions for mother–infant pair
  - Mother to mask for breastfeeding*
  - No isolation of infant from mother unless clinically indicated by disease severity*
  - COVID-19 testing for infant

Asymptomatic

- COVID-19 status: Negative
  - Consider other respiratory pathogens and supportive care in hospital if indicated by clinical status

- Antepartum
  - Maternal surveillance, including vital signs as indicated by severity, and/or obstetric early warning protocol
  - Fetal surveillance, including monthly ultrasounds for fetal anatomy, fluid, and fetal fetal growth

* Decisions related to separation of mother and baby, breastfeeding, and delayed cord clamping should be made in collaboration with the patient and her family and take into consideration available evidence and patient’s values.

Developed by the SOGC Infectious Disease Committee and approved by the SOGC Board of Directors.

Revised March 17, 2020