Mother-Infant Co-location or Separation with COVID-19: Talking Points for Counseling Families

Families with COVID-19 at delivery face difficult decisions about how best to care for the infant immediately after birth. These talking points are designed to help obstetric and pediatric providers counsel COVID-affected families about options for infant care.

The guidance below refers only to families with anticipated healthy term or late preterm infants who would typically room in with their mothers. Infants anticipated to need NICU care will be admitted to NICU; COVID+ mothers will not be able to visit the NICU.

Talking points:

- Novel coronavirus is a new infection and we are still learning about how it may affect newborn infants.
- Currently, we do not think infants get infected before birth. However, mothers who have COVID can pass the infection to their infants soon after birth.
- If a mother has COVID, the safest way to protect the newborn infant from infection is to keep mother and infant completely separate. This is what some national guidelines recommend (CDC, AAP). At UW, we currently recommend separating mothers and infants if the mother has an active COVID infection (current symptoms, or never had any symptoms so may be early in the illness)
  - Mother does not see the infant at all.
  - Infant goes to NICU for care.
  - Mother can pump breast milk to be given to infant.
  - Another COVID-negative family member or caregiver can visit the infant and will be involved in discharge planning.
- Another option is to have mother and infant stay in the same room, and have the mother take some extra precautions to decrease the chance of passing COVID to the infant. This approach allows breastfeeding and mother-infant bonding. This is what WA State DOH recommends (also WHO). At UW, we currently recommend keeping mothers and infants together if the mother’s COVID symptoms have resolved.
- If mother and infant stay together, the extra precautions include:
  - Mother wears a mask
  - Mother washes hands frequently
  - Mother washes breasts before breastfeeding
  - Infant stays in a crib, ideally 6 feet away from mother
- We think these extra precautions decrease the chance of COVID passing from mother to baby, but there is still a chance the infant could get infected.

Summary of current UW recommendations:

- Symptomatic or possibly pre-symptomatic mothers: Recommend separation
- Previous COVID with symptom resolution >3 days: Recommend co-location
Factors to consider as your family decides what to do:

- Does mother have a history of past COVID infection, and has been symptom-free for at least 3 days?
  - If yes, recommend staying together
- Is mother well enough to care for the infant in her room after delivery?
  - If yes, consider staying together
- Is there another COVID-negative family member or caregiver for the infant, if mother and infant separate? (We will help arrange testing for partner / family member)
  - If no, recommend staying together
- Are there language barriers that might make separation and infant care more challenging?
  - If yes, consider staying together