

Version 1/14/22 : COVID-19 Guidelines for Term and Preterm Newborns

Inborn: Mom screens (+), or is PUI (symptoms), consider Newborn a PUI. Mom asymptomatic and testing is pending, or Mom is vaccinated treat the baby as negative. Transition in Bay 4 or go to NNSY.

PUI - Person under investigation with symptoms

Mom (+)/PUI

Inborn: Mother positive/PUI (excludes asymptomatic screening) NICU team (2 LIPs and 1 RN) attend these deliveries. Notify Newborn Nursery/Night NP team covering Newborn of delivery (pager #4555) for heads up. Transport Isolette used, all team members droplet PPE with face shields with **N-95 mask**, since **the infant may need resuscitation with CPAP, PPV, intubation or open suctioning. Use inline Filter with all positive pressure devices.** Avoid unnecessary suctioning; blue bulb suctioning is prohibited. Infant asymptomatic can remain with Mom, admitted per Well Newborn protocol, if transition needed take to **Bay 4 in an Isolette.**

Outborn not newborn Infants

From home/ER/NICU with **respiratory viral pneumonia** need to be admitted to PICU until viral testing is negative similar to RSV patient

Asymptomatic Infant is a PUI, stays with Mom, if transition needed moved by **Isolette to Bay 4 transition beds.** Placed on **droplet isolation & face shield & N-95.** Cared for by the Newborn Nursery Team (Pager #4555) during the day, NP team at night admits to newborn like a standard admission. **If transition successful, infant rooms-in with Mom, placed in Isolette** and moved to Mom's room. Care per Well Newborn Protocol. If Mom unavailable, can go to 6JPP or 3JPP if a healthy caregiver is available or Level 10 if not, per Well Newborn Nursery Protocol

If Needs NICU Care stays in same room in Bay 2/3 or moved by **Isolette** from Bay 4 transition to Bay 2/3

Infant (PUI) and requires NICU. Admit to Bay 1 or Bay 2/3 (room with a door) by appropriate team. **Droplet isolation plus face shield & use N-95. Exam only by fellow/faculty with NP or resident assisting with orders, notes, etc...** For daily rounds, faculty examines the **Covid-19 (+)** patients last. Night coverage unchanged. If Mom tests (-) can discontinue isolation

Healthy Outborn Newborn Infant born to COVID-19/PUI mother, if asymptomatic stays at local institution

If Mother is (-) infant can come off isolation. If Mom (+) then **test infant at 48 hrs.** If baby (+) remains in isolation; consult **Epi regarding duration.** If baby (-) discontinue precautions. Cover infant when exiting hospital.

Mom (+) test baby at 48 hours of life. Use NP swab. Droplet isolation plus face shield & use N-95. If on NP- CPAP, NIV-NAVA or intubated on ventilator: **Jet/HFOV or open suctioning use N-95.** If on **Servo-i invasive ventilation with viral filter and in-line suction, RAM Cannula, NC or RA still use N-95.** Test for **COVID-19** ("Novel Coronavirus COVID-19"). Test (-), stop precautions. **If (+) see NICU Isolation guideline for duration of precautions.**

Mothers COVID-19 positive/PUI **should pump and give breast milk** by bottle or NG if necessary

Outborn Term or Preterm Newborns with nonviral respiratory issues (extreme prematurity, PDA, NEC etc) born to a COVID-19 (+) mother/PUI can be admitted to Bay 1/2/3. Droplet isolation, Face shield & N-95 mask. Mom is (-) D/C precautions. Mom is (+) test infant when > 48 hrs of age otherwise test all outborn infants on admission. Outborn infants with unknown COVID status need to be in Droplet isolation, Face shield & N-95 mask until admission test is (-).

NICU Visiting Rules: 1) **Asymptomatic** caregiver/nonmaternal parent if not PUI /Covid-19 (+) is permitted to visit and/or provide care to the asymptomatic newborn but wears appropriate PPE. 2) Mothers: COVID-19 positive/PUI are not allow to visit, unless (-) or if test (+), ≥ 10 days since (+) test, afebrile for 72 hours w/o antipyretics and free of respiratory symptoms other than improving chronic cough. 3) No parental limitations if > 2 weeks since 2nd dose of vaccine or since single dose vaccine (J&J) when exposed.