Pregnant women with SARS-CoV-2 exposure

- Travelled to an affected country within the previous 14 days
- Close contact with a confirmed case of COVID-19 (i.e., <1 metre for >15 minutes, living together, direct contact with body fluids)

**CLINICAL EXAMINATION + RT-PCR (SARS-CoV-2) on deep nasopharyngeal and pharyngeal samples**

- **ASYMPTOMATIC**
  - No isolation rooms
- **SYMPTOMATIC**
  - Fever >38°C AND respiratory symptoms

**MONITORING at home**
- (T° + Respiratory symptoms)
  - Isolation at home for 14 days
    - If delivery:
      - Breastfeeding as per guidelines
      - Mother isolated from newborn until viral shedding clears
    - Stop Monitoring
    - USG Fetal surveillance: Growth + Doppler / 2 weeks

**MONITORING AT HOSPITAL**
- Isolated room prefer with negative pressure (IRNP)
  - Protective gear* for visitors / health personnel
  - Delivery and neonatal procedure equipment on site

**SARS-CoV-2 NEGATIVE**
  - Isolation at home for 14 days
  - If delivery:
    - Breastfeeding as per guidelines
    - Mother isolated from newborn until viral shedding clears
  - Stop Monitoring
  - USG Fetal surveillance: Growth + Doppler / 2 weeks

**SARS-CoV-2 POSITIVE**
  - Isolation at home 14 days
  - + Clinical self-monitoring
  - If symptoms persist:
    - RETEST (possible false negative)

**HOSPITALISATION IN A TERTIARY CENTER**

**Maternal surveillance:**
- + T°, HR, BP, RR (3-4x/day)
- + Chest imaging (high resolution CT-scan or X-ray)

**Fetal:**
- + FHR (1x/day)
- + Fetal maturation by Betamethasone injection depending on maternal status (until 34 to 37 WG)
- + IV Antibiotics treatment (depending local protocol)

**INTENSIVE CARE UNIT ADMISSION (Quick SOFA Score)**
More than 1 following criteria:
- Systolic blood pressure <100mmHg
- Respiratory rate >22
- Glasgow conscious score <15

**SEVERE FAILURE CRITERIA** (consider cesarean delivery)
- SEPTIC SHOCK
- ACUTE ORGAN FAILURE
- FETAL DISTRESS

**DELIVERY**

**Before 24 WG**
- if severe maternal illness, consider MTP (if legal)

**After 24 WG**
- On site / IRNP
- Vaginal delivery (induction of labor + instrumental delivery when possible unless severe failure criteria)
- Early clamping of umbilical cord and cleaning of newborn
- Newborn monitoring in IRNP
- SARS-CoV-2 RT-PCR of the newborn
- Breastfeeding with due precautions and considerations
- Mother isolated from newborn until viral shedding resolves

*PROTECTIVE GEAR*
Contact and Airborne additional measures
- FFP2 or N95 mask
- Gloves
- Gown
- Eye protection