



COVID-19: Recommendations for People who are Pregnant, Breastfeeding or Chestfeeding, or Caring for Newborns

COVID-19 remains a significant risk in New York City (NYC) and across the U.S. If you are pregnant, breastfeeding or chestfeeding, or caring for a newborn, review this guidance to help you safely plan before, during and after birth.

People who are pregnant or breastfeeding or chestfeeding may choose to be vaccinated. If you are pregnant or breastfeeding or chestfeeding, it may be helpful to discuss vaccination with your health care provider. However, you do not need clearance from a provider to be vaccinated. Pregnant people are among the groups eligible to be vaccinated, as part of New York State's phased vaccine distribution. For a full list of eligible groups, visit nyc.gov/covidvaccinedistribution. To find a vaccination site and make an appointment, visit vaccinefinder.nyc.gov. If you need assistance making an appointment at a City-run vaccination site, call 877-VAX-4NYC (877-829-4692). For information on COVID-19 vaccines, visit nyc.gov/covidvaccine.

Are people who are pregnant at a higher risk for severe illness from COVID-19?

Yes. Based on what we know at this time, people who are pregnant are at a higher risk for severe illness from COVID-19 than people who are not pregnant. People who are pregnant and have COVID-19 may also have an increased risk for preterm birth and other negative pregnancy outcomes. There have been a few reports of babies who may have been infected with COVID-19 before birth, but this seems to be [rare](#).

For more information on people at increased risk of severe COVID-19 illness, visit nyc.gov/health/coronavirus and click on "Prevention and Groups at Higher Risk" on the left side of the page.

What can people who are pregnant do to prevent COVID-19 transmission?

Keep in mind these key actions to prevent COVID-19 transmission, even if you have been fully vaccinated against COVID-19:

- **Stay home if you are sick.** Stay home if you are not feeling well or recently tested positive for COVID-19.
- **Stay apart.** Stay at least 6 feet from others, when possible. Avoid large gatherings, especially indoors.
- **Wear a face covering.** Protect yourself and those around you by wearing a face covering when outside the home, and even at home if you or someone you live with is sick or was recently exposed to COVID-19. The face covering should snugly cover your nose and mouth.
- **Keep your hands clean.** Wash your hands with soap and water often and use alcohol-based hand sanitizer when soap and water are not available. Avoid touching your face

with unwashed hands and cover your coughs and sneezes with your arm or a tissue, not your hands.

Should I change my prenatal care appointments? What about ultrasounds?

Do not skip your health care appointments during or after pregnancy. Talk to your health care provider about how to stay safe and healthy and how to protect yourself from COVID-19. Work together to make a plan that is best suited for you and your pregnancy.

Your provider may choose to do virtual visits with you. If this is the case, ask them to help you get the equipment you may need, such as a home blood pressure monitor, urine testing strips, a scale and a thermometer. Ask your provider if they have an online portal where you can access your medical records and medication list.

In-person visits may be different, as well. The visits may be shorter, and your partner or other people may not be allowed to join you. During in-person visits, you may receive only the minimum number of ultrasounds. In general, a person who is pregnant and is considered low-risk will only need to have an ultrasound early in the pregnancy and again at about four months to examine the fetus. This may change depending on your clinical situation. Do not go to any retail ultrasound locations, as services at these locations are often unlicensed and unmonitored.

What should I do if I have COVID-19 symptoms or have other concerns during my pregnancy?

If you think you might have COVID-19, contact your health care provider and tell them about your symptoms. Contact them if you have concerns, feel something is wrong or need an in-person visit.

Should I change my birth plan or location of birth?

If you are late in your pregnancy, you may be concerned about going to a hospital or birthing facility to birth your baby. You may also be concerned about your birth plan. Given the challenges of the COVID-19 public health emergency, your birth experience is very likely to be different from what you expected.

Some may now consider a home birth as a safer option. This can be a difficult choice. Many home birth providers may not accept new patients during this time. Consult with your health care provider if you have any questions or concerns about your birth plan or location of birth. They will advise you on the best course of action, as well as their facility's infection control policy.

If you are sick or have [COVID-19 symptoms](#), contact your hospital or birthing facility before you arrive. This will allow them to prepare for your arrival.

Read "[Giving Birth 'In Place': A Guide to Emergency Preparedness for Childbirth](#)" by the American College of Nurse-Midwives for guidance on what to do in the event that you are unable to travel to a hospital or birthing facility.

Can people with COVID-19 breastfeed or chestfeed?

Yes. People with COVID-19 or people being evaluated for COVID-19 can breastfeed or chestfeed while taking precautions to avoid spreading the virus to their baby.

While evidence is limited at this time, it appears unlikely that COVID-19 can be transmitted to a baby while breastfeeding or chestfeeding. Due to the many benefits of breastfeeding or chestfeeding, including providing the birthing parent's antibodies (which protect the baby against infection overall), it is recommended that parents who want to feed their baby human milk do so while adhering to certain precautions, including washing their hands thoroughly with soap and water for at least 20 seconds immediately before breastfeeding or chestfeeding, and wearing a face covering while breastfeeding or chestfeeding. Another option is to pump or hand express milk. If using a pump, thoroughly wash all parts of the pump with soap and water between uses. Consider having someone who does not have COVID-19 feed the baby the parent's milk in a bottle.

Can people with COVID-19 “room in” with their baby?

“Rooming in” is having your baby stay in the same room as you. Some health care providers may recommend separating the baby from the parent who has COVID-19 while the parent is in the hospital or is being evaluated for COVID-19. This is to reduce the risk of the newborn becoming infected with COVID-19 and should be done on a case-by-case basis. The Centers for Disease Control and Prevention (CDC) [recommends](#) that the health care provider and parent make this decision jointly. A separation may last until the parent is no longer infectious or longer if the clinical situation changes. Separation may involve keeping the baby at least 6 feet away from the parent while in the same hospital room, or a true physical separation with another healthy adult assisting with caring for the baby.

Hospitals and birthing facilities may also limit the number of visitors to keep you and your support team safe. Your support team can include your partner, doula, friends or other family members you had planned to be present for the labor and birth. Make sure that your support team follows the hospital's instructions. For information on your rights during childbirth, visit nyc.gov/health and search for **respectful care at birth**.

What warning signs should I look for after birth?

Medical complications can come up after giving birth. The CDC's [“Hear Her” campaign](#) has important information for people who are pregnant, people who have recently given birth, their support teams and their health care providers.

Tell someone if you notice any signs or symptoms that concern you after giving birth. You have the right to speak up. If you are still in the hospital or birthing center, tell your health care provider about your concerns. If you are at home, contact your provider, call **911** or go to an emergency room.

Warning Signs for Health Problems After Giving Birth



Call 911 if you have:

- Chest pain
- Trouble breathing or shortness of breath
- Thoughts about hurting yourself or your baby
- A seizure

Call your provider if you have:

- Headaches that will not go away, even after taking medication
- Headaches with blurry vision or other vision changes
- An incision that is not healing
- Bleeding (for instance, enough to soak through one or more pads in one hour) or passing large blood clots
- A temperature of 100.4 degrees Fahrenheit or higher
- Legs that are swollen, red, painful or warm to the touch

When you contact your provider, call **911** or go to the emergency room, be sure to report the following:

1. You recently had a baby;
2. When you had your baby; and
3. The specific symptoms you are having.

For example: “I had a baby six days ago, and I have had a bad headache that is not getting better even after taking ibuprofen.”

Information for people who have recently given birth (the “fourth trimester”)

Stay connected to your support team (partner, doula, friends or other family members) by phone, text, video calls or social media. Your support team may be eager to see you and meet the new baby, but it is important to practice the four key actions to prevent COVID-19 transmission: stay home, stay apart, wear a face covering, and keep your hands clean.

It is normal to feel many emotions, including sadness, in the first few months after childbirth. Sometimes emotions can be difficult to handle. About one in 10 people become depressed during pregnancy, and about half of them have postpartum depression after the baby’s birth. To learn more about postpartum depression, visit nyc.gov/health and search for **postpartum depression**.

If the symptoms of stress or depression become overwhelming, contact NYC Well, your connection to free, confidential mental health support. Speak to a counselor via phone, text or chat and get access to mental health and substance use services in more than 200 languages,

24/7. For support, call 888-NYC-WELL (888-692-9355), text “WELL” to 65173 or chat online at nyc.gov/nycwell.

If you have thoughts of harming yourself or your baby, call **911**.

Other resources for new parents

- For information about free and low-cost services and hotlines in NYC, call **311**.
- For information on the “fourth trimester,” visit the Fourth Trimester Project at newmomhealth.com.
- For information on postpartum depression, visit Postpartum Support International (PSI) at postpartum.net, call the PSI HelpLine at 800-944-4773 (available in English and Spanish) or text 800-994-4773 (English) or 971-420-0294 (Spanish).
- As always, reach out to your health care provider by phone, email or text, particularly since in-person health care visits are limited at this time. If you do not have a health care provider, call **311**.
- Doula support can help families handle the physical, emotional and practical issues that surround childbirth. Doulas are currently providing virtual and in-person support during COVID-19. If you are interested in receiving postpartum doula support, visit the NYC Department of Health and Mental Hygiene’s [Doula Care](#) page and look for “Programs Offering Free Doulas.”

For more information on COVID-19, visit nyc.gov/health/coronavirus or text "COVID" to 692-692 for real-time updates. Message and data rates may apply.

The NYC Health Department may change recommendations as the situation evolves.

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