

COVID-19

Visitor Safety Agreement

NOVEMBER 5, 2020



The UAMS Women and Infant Service Line staff are dedicated to providing excellent care for you and your baby. Because safety is a priority for us, we have made some changes to our standard visitation and unit guidelines as we deal with public health and patient safety concerns related to COVID-19. We want this to be a safe place for you, our mothers and infants. Everyone has a huge role in helping us reach this goal. THESE RULES MAY BE CHANGED AT ANY TIME, AS NECESSARY TO PROTECT PUBLIC HEALTH AND PATIENT SAFETY. To help ensure the safety of everyone on the unit and to ensure you enjoy your stay with us, here is a current list of some of the safety measures we will use on our unit:

1. One visitor is able to stay until both the mother and baby are discharged. This applies to moms and babies who are both on the post partum unit. There may be more than one visitor during the hospitalization, but only one at a time and one per day. If a different visitor from the visitor that stayed overnight is coming, the first one must leave before 10 am. Any visitor present at 10 am will count as the visitor for the day.
2. The NICU will allow 2 designated visitors throughout the infant's hospital stay. This will be the mother (or guardian) and one other person designated by the mother. Only one visitor at a time, and only one visitor per day. Visitors are not allowed to swap out after 8am each day.
3. Visitors must wear a mask at all times.
4. L&D and Postpartum visitors will not be allowed to leave the room under any circumstances. This includes smoking or going out to get food. NICU visitors may use the restrooms, showers and microwaves on the NICU and should stay in the vicinity of their baby's room. Visitors may buy a meal from UAMS Dining Services for \$7 or order the standard patient meal with a bottle of water for \$3. Payment is by debit or credit card for Dining Service gift card only.
5. All visitors will be asked health screening questions and have their temperature checked daily by a staff member.

Because you can be infected with COVID-19 and not display symptoms for several days, you must immediately report any of the following symptoms to nursing staff:

- Fever
- Cough
- Shortness of breath
- Sore throat
- Loss of taste/smell
- Diarrhea
- Unexplained body aches

If you learn that someone you have been in contact with before you entered the hospital is suspected or confirmed to have COVID-19, or if you learn that someone you have been in contact with was around someone else who has been put under quarantine, you must immediately report this to nursing staff.

I have read and understand this information and agree to abide by this Visitor Safety Agreement and all other UAMS visitor policies.

Visitor Signature

Witness Signature

Visitor Name (Print)

Visitor Phone Number

Date _____

Time _____

COVID-19

COVID for New and Expectant Moms

APRIL 17, 2020



PREGNANCY

Little is known about COVID -19 specific to pregnancy. Based on available information, **pregnant people seem to have the same risk as adults who are not pregnant.** However, we do know that:

- Pregnant people have changes in their bodies that may increase their risk of some infections.

Pregnant people should protect themselves from COVID-19

- Avoid people who are sick or who have been exposed to the virus.
- Clean your hands often using soap and water or alcohol-based hand sanitizer.
- Clean and disinfect frequently touched surfaces daily.

Risks to the pregnancy and to the baby

- Pregnant people have had a higher risk of severe illness when infected with viruses from the same family as COVID-19 and other viral respiratory infections, such as influenza.
- It is always important for pregnant people to protect themselves from illnesses.

Mother-to-child transmission

- Mother-to-child **transmission of coronavirus during pregnancy is unlikely, but after birth a newborn is susceptible to person-to-person spread.**
- A very small number of babies have tested positive for the virus shortly after birth. However, it is unknown if these babies got the virus before or after birth.
- The virus has not been detected in amniotic fluid or breastmilk.

BREASTFEEDING IF YOU HAVE COVID-19

Breast milk provides protection against many illnesses and is the best source of nutrition for most infants. You, along with your family and healthcare providers, should decide whether and how to start or continue breastfeeding. **In limited studies, COVID-19 has not been detected in breast milk;** however we do not know for sure whether mothers with COVID-19 can spread the virus via breast milk.

If you are sick and choose to direct breastfeed:

- Wear a facemask and wash your hands before each feeding. Be sure to shower often to make sure your breasts are clean.

If you are sick and choose to express breast milk:

- Clean your breasts before each session and express breast milk often to establish and maintain milk supply.
- A dedicated breast pump should be provided.
- Wash hands before touching any pump or bottle parts and before expressing breast milk.
- Follow recommendations for proper pump cleaning after each use, cleaning all parts that come into contact with breast milk.

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GOING HOME:

If mom and baby tested positive for COVID-19 **BUT** baby has no symptoms

- All of the baby's caregivers should follow CDC guidelines for masks, gloves and hand hygiene.
- The AAP also recommends that individuals older than 60 years of age or those with a compromised immune system should NOT care for the infant.

If mom tested positive for COVID-19 **BUT** baby tested negative

- Baby should go home and be cared for by uninfected persons, ideally.
- If mom is in the same household as baby, she should maintain a distance of at least 6 feet from the baby. When closer than 6 feet from the baby, mom should use a mask and proper hand hygiene until she:
 - is without fever for 72 hours (without medicine) AND at least 7 days have passed since the first symptom
 - has negative testing for COVID-19 from at least **two** tests in a row (24 hours apart)

If mom tested positive for COVID-19, other caregivers in the home should get tested! Use proper mask and hand hygiene and stay at least 6 feet away from infant until results from tests are known.

DO NOT ALLOW ANYONE WHO DOES NOT LIVE IN THE HOME OR ANYONE WHO HAS TESTED POSITIVE FOR COVID-19 VISIT YOUR HOME.

GOING OUT IN PUBLIC:

It is not recommended to take your baby in public but if you have to, do NOT put a mask on any child under the age of 2! A person needs to be able to remove the mask themselves in order to wear one. If it is absolutely necessary to leave your home with your infant, consider wearing your baby on you or covering the car seat with approved devices. Go to www.healthychildren.org and search "baby wearing". Use a car seat cover ONLY if it does not have a layer under the baby. Nothing should ever go underneath your child's body or between her body and the harness straps. Be sure to leave baby's face uncovered!

RESOURCES

Websites:

- Centers for Disease Control and Prevention - www.CDC.gov
- American Academy of Pediatrics - www.aap.org
- WIC - www.wicprograms.org
- The AAP Parenting Website - www.healthychildren.org

Phone numbers:

- UAMS Lactation Services: 501-526-3558 (warm-line)
- Breastfeeding Hotline: 1-800-445-6175
- WIC: 501-280-3100
- IDHI Call Center: 501-526-7425 (24/7 Nurse)

Be sure to go to all of the follow-up appointments that are recommended for you and for your baby after you leave the hospital!

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The CDC recommends that people who are mildly ill with COVID-19 or concern for to isolate at home during their illness. Your health care provider has decided you can be cared for at home. Below are instructions for isolating at home.

Stay home except to get medical care

Restrict your activities outside your home, except for getting medical care. Do not go to work, school, or public areas. Avoid using public transportation, ride-sharing, or taxis. Ask visitors to stay away from your home.

Separate yourself from other people and animals in your home

Stay in a specific room and away from other people in your home. Use a separate bathroom, if available. People sick with COVID-19 should limit contact with pets and animals. Have another member of your household care for your animals while you are sick.

Call ahead before visiting your doctor

Wear a facemask

If you are sick, and you visit your healthcare provider let them know so they can provide you with the right mask to cover your face, mouth and nose.

Treating your symptoms

You can take over-the-counter Tylenol or ibuprofen according to the label instructions to help reduce fever. Drink plenty of fluids to stay hydrated, and use cough drops or honey to help soothe your cough. Honey is not recommended under 1 year of age. Please call your personal doctor or see options below if you have questions around doses of these medicines.

Cover your coughs and sneezes and clean your hands often

Cover your mouth and nose with a tissue when you cough or sneeze. Throw used tissues in a lined trash can. Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; using the bathroom; and before eating or preparing food. If soap and water are not available, use an alcohol-based hand sanitizer that contains at least 60% alcohol. Soap and water are the best option if hands are visibly dirty. Avoid touching your eyes, nose, and mouth with unwashed hands.

Avoid sharing personal household items

Do not share dishes, drinking glasses, cups, eating utensils, towels, or bedding with other people or pets in your home. After using these items, wash thoroughly with soap and water.

Clean all “high-touch” surfaces every day

High-touch surfaces include counters, tabletops, door knobs, bathroom fixtures, toilets, phones, keyboards, tablets, and bedside tables. Also, clean any surfaces that may have blood, stool, or body fluids on them. Use a household cleaning spray or wipe according to the label instructions.

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Monitor your symptoms

Seek medical attention right away if your illness gets worse (e.g., difficulty breathing) you can access several virtual options in our community:

For Children: Arkansas Children's Triage Line: 1-800-743-3616 (24/7) For Adults: UAMS Health Now: www.uamshealth.com/healthnow and Baptist Health: www.baptist-health.com/services/virtual-care-arkansas

Before seeking care

Call your healthcare provider and tell them you have, or are being evaluated for, COVID-19. Do not go to your doctor's office, urgent care clinic, hospital or Emergency Department without calling first to get instructions for protecting the safety of healthcare workers and other patients. Persons placed under active monitoring or facilitated self-monitoring should follow instructions provided by the Arkansas Health Department.

If you have a medical emergency and need to call 9-1-1, notify the dispatch personnel that you have, or are being evaluated for, COVID-19. If possible, put on a face mask before emergency medical services arrive.

Discontinuing home isolation

Patients with confirmed COVID-19 should remain under home isolation precautions until the risk of secondary transmission to others is thought to be low. The decision to discontinue home isolation precautions will be made on a case-by-case basis by the Arkansas Department of Health.

More Information is available at CDC – www.cdc.gov

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UAMShealth.com

January 2021

Dear Colleagues,

Many of our colleagues and patients have asked about the safety of the COVID-19 vaccine for pregnant or breastfeeding women. We do not hesitate to recommend the vaccine in these circumstances.

Unfortunately, the vaccine trials for the two current COVID-19 vaccines were designed to not include pregnant or lactating women. A small number of women became pregnant in the trials, but there is limited data available at this point. While we do not have clinical trial data upon which to base our decisions, we do understand the biology of the vaccine and how it works and can draw some meaningful conclusions.

The vaccine is made of lipid nanoparticles that contain mRNA for the SARS-COV-2 spike protein (the identifying part of the virus). Once injected intramuscularly, the mRNA largely remains isolated to the area of injection and is taken up by the local muscle and antigen presenting cells in regional lymph nodes for transcription. The transcribed product is the spike protein, which stimulates a response from your own immune system (but NOT an infection with the actual virus). The symptoms some people experience after receiving the vaccine (fever, aches, nausea and headache) are due to their immune response to the vaccine. (However, lack of any side effects does NOT mean the vaccine didn't work for you.) Through this mechanism of action it is unlikely that this vaccine will cross the placenta. However, should there be crossing of the placental barrier via studies of this vaccine, it appears fragmented and will not change the DNA material. It will not get into the nucleus of the DNA cell and therefore cannot change fetal DNA cells.

During lactation, there is an incredibly low likelihood that the lipid nanoparticles or mRNA will enter a woman's blood stream and reach the breast tissue intact. There is even less of a chance that the particles will cross from the blood stream into the mother's milk. But even if it these particles were able to enter breast milk, enzymes in the baby's digestive system would make them inactive.

There are potential benefits to getting the vaccine during pregnancy or while breastfeeding. Antibodies or T-cells stimulated by the vaccine may cross the placenta, or transfer into the breastmilk, and these may provide passive immunity to the infant.

The science is reassuring. Given the potential risks of COVID-19 infection, including death, and the safety of the vaccine that has been demonstrated in other patients, we believe the vaccine is safe and beneficial to both mother and baby.

We encourage any woman of childbearing age to discuss her individual risk and concerns with her healthcare provider and to consider getting the vaccine when it becomes available to her, even if she is pregnant or breastfeeding.

Additional information can be found in the statements below from the Academy of Breastfeeding Medicine and the American College of Obstetricians and Gynecologists:

<https://www.bfmed.org/abm-statement-considerations-for-covid-19-vaccination-in-lactation>

<https://www.acog.org/clinical/clinical-guidance/practice-advisory/articles/2020/12/vaccinating-pregnant-and-lactating-patients-against-covid-19>

Sincerely,

A handwritten signature in black ink that reads "Misty Virmani MD". The signature is written in a cursive, flowing style.

Misty Virmani, MD
Assistant Professor of Pediatrics, Neonatology
Director, UAMS Breastfeeding Medicine
Director, ACH NICU Breastfeeding Medicine
University of Arkansas for the Medical Sciences, Little Rock
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A handwritten signature in black ink that reads "Nirvana A. Manning MD, FACOG". The signature is written in a cursive, flowing style.

Nirvana A. Manning, MD, FACOG
Chair and Associate Professor of Obstetrics and Gynecology
Service Line Director, Women and Infant's Services
University of Arkansas for the Medical Sciences, Little Rock

COVID-19 Vaccines

Do I need a COVID vaccine?

Yes. A 2 dose series of this vaccine can help protect you, your family and your community from this virus, which can cause serious illness and sometimes even death.

Is the vaccine safe?

All the critical steps to test the safety and the benefits of the COVID vaccines have occurred. The safety and effectiveness of COVID vaccines will continue to be monitored as they are made available to more people.

Is the vaccine effective?

Yes. Results have shown that two doses of the vaccine give up to 95% protection against COVID-19 in people 16 years old and older.

Should I get a COVID vaccine if I am pregnant or breastfeeding?

You may be vaccinated if you are pregnant or breastfeeding, but first talk with your healthcare provider.

How long does it take for the vaccine to work?

The vaccine offers some degree of protection from the COVID-19 virus within two weeks of the first dose. It is very important that people receive a second dose to provide the maximum protection from the vaccine.

How long does protection from the vaccine last?

Since COVID-19 is a new virus, we don't know yet how long the vaccine provides protection. It is possible we will need to give additional doses of this or other coronavirus vaccines in the future. More research is needed to answer this question.

Do I have to wear a mask after I get a vaccine?

Yes. Masks, hand washing and social distancing will continue to be important well into 2021.