Outpatient Assessment and Management for Pregnant Women With Suspected or Confirmed Novel Coronavirus (COVID-19)

Unlike influenza and other respiratory illnesses, based on limited number of confirmed COVID-19 cases, pregnant women do not appear to be at increased risk for severe disease. However, given the lack of data and experience with other coronaviruses such as SARS-CoV and MERS-CoV, diligence in evaluating and treating pregnant women is warranted. This algorithm is designed to aid practitioners in promptly evaluating and treating pregnant persons with known exposure and/or those with symptoms consistent with COVID-19 (persons under investigation [PUI]). If influenza viruses are still circulating, influenza may be a cause of respiratory symptoms and practitioners are encouraged to use the ACOG/SMFM influenza algorithm to assess need for influenza treatment or prophylaxis.


**Assess Patient’s Symptoms**

Symptoms typically include fever ≥38°C (100.4°F) or one or more of the following:
- Cough
- Difficulty breathing or shortness of breath
- Gastrointestinal symptoms

**Conduct Illness Severity Assessment**

- Does she have difficulty breathing or shortness of breath?
- Does she have difficulty completing a sentence without gasping for air or needing to stop to catch breath frequently when walking across the room?
- Does patient cough more than 1 teaspoon of blood?
- Does she have new pain or pressure in the chest other than pain with coughing?
- Is she unable to keep liquids down?
- Does she show signs of dehydration such as dizziness when standing?
- Is she less responsive than normal or does she become confused when talking to her?

**Assess Clinical and Social Risks**

- Comorbidities (Hypertension, diabetes, asthma, HIV, chronic heart disease, chronic liver disease, chronic lung disease, chronic kidney disease, blood dyscrasia, and people on immunosuppressive medications)
- Obstetric issues (eg, preterm labor)
- Inability to care for self or arrange follow-up if necessary

**Low Risk**

- Refer patient for symptomatic care at home
- Monitor for development of any symptoms above and re-start algorithm if new symptoms present
- Routine obstetric precautions

**Moderate Risk**

- If no respiratory compromise or complications and able to follow-up with care
- Admit patient for further evaluation and treatment. Review hospital or health system guidance on isolation, negative pressure and other infection control measures to minimize patient and provider exposure

**Elevated Risk**

- Recommend she immediately seek care in an emergency department or equivalent unit that treats pregnant women. When possible, send patient to a setting where she can be isolated.
- Notifying the facility that you are referring a PUI is recommended to minimize the chance of spreading infection to other patients and/or healthcare workers at the facility
- Adhere to local infection control practices including personal protective equipment

**Abbreviations:** ABG, arterial blood gases; CDC, Centers for Disease Control and Prevention; HIV, human immunodeficiency virus.

**Healthcare providers should immediately notify their local or state health department in the event of a PUI for COVID-19 and should contact and consult with their local and/or state health department for recommendations on testing PUIs for COVID-19.**