COVID-19 in Pregnancy ED

You must carefully read the "Consumer Information Use and Disclaimer" below in order to understand and correctly use this information.

General Information

You came to the Emergency Department (ED) for signs of Coronavirus Disease 2019 (COVID-19). You may be at a higher risk for early labor if you have COVID-19 while you are pregnant. You may be waiting on test results. The staff will notify you if there are concerning results.

COVID-19 spreads easily through droplets when you sneeze or cough. Doctors believe the germs also survive on surfaces like tables, door handles, and telephones. However, this is not a common way that COVID-19 spreads.

What care is needed at home?

- Call your regular doctor to let them know you were in the ED. Make a follow-up appointment if you were told to.
- Drink lots of water, juice, or broth to replace fluids lost from a fever.
- Use a cool mist humidifier. This will make it easier to breathe.
- Use 2 to 3 pillows to prop yourself up when you lie down to make it easier to breathe and sleep.
- Do not smoke and do not drink beer, wine, or mixed drinks (alcohol).
- To lower the chance of passing the infection to others:
  - Stay home for at least 5 days while you recover. Only go out if you need to get medical care. Wear a mask if you must be around others at home or in public.
  - At home, try to stay in a separate room, away from other people and animals. This is called "self-isolation." Use a separate bathroom if possible.
  - Wear a mask over your mouth and nose if you are around others who are not sick. Respirator masks like N95 and KN95 can filter out even very tiny air particles. Whatever type of mask you use, it's important that it fit snugly over your face with no gaps. You can improve the fit by using a mask with an adjustable nose wire, adjusting or knotting the ear loops to make it tighter, or wearing a cloth mask on top of a disposable mask. If other people have to be in the same room or vehicle with you, they should wear a mask also.
After your baby is born, wear a mask over your mouth and nose when you feed or hold your baby or pump breast milk for your baby.

Wash your hands often. Avoid touching your face, especially the mouth, nose, and eyes. Avoid these same areas on your baby.

Do not make food for others.

Continue to self-isolate until your doctor or nurse tells you it's OK to return to your normal activities. When you can stop self-isolation will depend if you have a fever and if your symptoms are improving. In some cases, you may need to self-isolate until you have a negative test (showing that the virus is no longer in your body).

When do I need to get emergency help?

Call for an ambulance right away if:

- You have severe pain in your belly that continues after a contraction.
- You have a very strong urge to push the baby out.
- You are having so much trouble breathing that you can only say one or two words at a time.
- You need to sit upright at all times to be able to breathe and or cannot lie down.

Return to the ED if:

- You have trouble breathing when talking or sitting still.

When do I need to call the doctor?

- You have very dark urine or do not urinate for more than 8 hours.
- Contractions every 10 minutes or more often.
- Low, dull back pain that does not go away.
- Pressure in your pelvis that feels like your baby is pushing down.
- Watery or bloody fluid leaking from your vagina
- Cramps in your lower belly that come and go or are constant.
- Your baby moves less than usual or stops moving.
- You have a fever of 100.4°F (38°C) or higher.
- Signs of a dangerous condition called "preeclampsia," such as a headache that is very bad or doesn't go away, changes in vision, or pain in the upper belly
- You have new or worsening symptoms.

Last Reviewed Date