

HCH NICU Infection Control for COVID-19

Updated 3/27/2020

Subject to change pending new data / recommendations

BACKGROUND INFORMATION

HCH Silver Spring NICU is a Level III NICU with 4 large pods accommodating 8-12 babies each, 1 NICU annex that holds up to 8 infants without respiratory support, and 2 isolation (negative pressure) rooms. The goal of this infection control plan is to protect newborns and staff from acquiring and transmitting COVID-19.

INFANTS BORN TO COVID-19+/PUI MOTHERS

All infants in this category are considered PUIs. Infants will be managed per the guideline "HCH NICU Management of Infants born to Mothers with Confirmed COVID-19 disease or who are PUIs."

INFANTS IN THE NICU WHO BECOME PUIs AFTER DELIVERY

Infants in the NICU may become PUIs if they are exposed to someone with COVID-19. Infants who become PUIs should be isolated immediately and then managed per the guideline "HCH NICU Management of Infants born to Mothers with Confirmed COVID-19 disease or who are PUIs." Infection control should be notified and will advise re: testing of other possibly exposed persons.

PRACTICES TO LIMIT EXPOSURE OF NICU PATIENTS AND STAFF TO COVID-19

VISITORS: Neither mothers who are COVID-19+ or PUIs nor their partners may visit the infant in NICU. Consult infection control about when the mother/partner may come off COVID-19 precautions and may visit the NICU (depending on hospital policies at the time). A NICView camera will be provided for the family. Telephone / verbal consent is sufficient to initiate the NICView camera in this case. Preparation for infant discharge home from the NICU is outlined in "HCH NICU Discharge of Infants born to Mothers with Confirmed COVID-19 disease or who are PUIs" (coming soon).

Infants who are not COVID-19+ or PUIs may have visitors per the hospital / NICU policy. RNs should wipe down surfaces after each parent visit. Parents should wear PPE only if recommended per hospital policies.

CONSULTATIONS & PARENT UPDATES: NICU providers will perform prenatal consultations and parent updates by telephone if a parent is COVID-19+ or a PUI.

BREAST MILK: Is safe for consumption. Mothers must be instructed in proper hygiene to use when pumping. Bags and bottles should be cleaned when entering NICU. See nursing process regarding breastfeeding.

TEMPERATURES: Staff should self-monitor for fever at home. Staff temperatures will be taken daily in the NICU. A temperature of ≥ 100 degrees should be reported.

PPE: When caring for COVID-19+ or PUI infants, staff should wear PPE as described in the guideline "HCH NICU Management of Infants born to Mothers with Confirmed COVID-19 disease or who are PUIs." At other times staff should wear masks per hospital guidelines. NICU staff should wear masks when social distancing is not possible because they must be within 6 feet of patients or parents for care.

INCUBATORS: Incubators are an excellent means of creating barriers between individuals. When possible, infants on respiratory support should be placed in an incubator. They may come out of the isolette for PO feeds, maintaining at least 6 foot separation from infants in open cribs. Infants on respiratory support may be removed from incubators if medically indicated (e.g., high temperature despite incubator set temp < 27.5 degrees C). Infants on low flow nasal cannula ($\leq \frac{1}{4}$ lpm) may be placed in a crib to ensure normal temperatures prior to discharge. Approximately 2-4 incubators should be preserved for admissions. To conserve incubators infants on room air requiring extra heat may be placed on open warmers. If incubators must be freed up, medical team will determine best candidates (likely infants on lowest flow).