

*Disclaimer: This Webinar was recorded on 5/28/20 and the FAQ answers published on 6/2/20. All current recommendations and policies are subject to change. For the most up to date UCSF COVID related information, visit <https://coronavirus.ucsf.edu/>.*

## Inpatient Policies and Care

### ***What is the visitor policy at the UCSF Birth Center (Labor & Delivery)? Can they leave the hospital?***

All patients can have one single visitor during their entire hospital stay including labor and postpartum. This person cannot have infectious symptoms themselves. If a visitor begins to experience symptoms, they will be asked to leave.

This visitor can leave the hospital, if needed, or go down to the cafeteria, but we are asking that they limit their activity. If they leave the hospital, they will need to be re-screened for respiratory symptoms. If they develop respiratory symptoms concerning for COVID-19, they will not be allowed to return to the hospital.

Is the one person at the bedside in the Neonatal Intensive Care Unit (NICU) the birthing parent or a support person? The one person can be a caregiver designated by the family; this means it can be the birthing parent alternating with a support person. The policy is one person at the bedside at a time. There are a few exceptions to this rule. If you have any questions, please ask your baby's care team.

### ***Why are support persons not tested for COVID-19 at the Birth Center (Labor & Delivery) as well?***

All visitors are screened for symptoms and risk factors for COVID19 before being allowed to enter the hospital. But COVID19 PCR testing is designated only for patients admitted to the hospital at this time. Screening all visitors, or even staff, is an approach that some hospitals may take, and our policies may change to reflect this in the future. However, weighing the risks and benefits of using a limited resource, in consideration of the prevalence of the disease in our general community, the UCSF Medical Center feels that testing the patient alone is adequate screening at this time. For the purpose of assessing risk to the newborn, it is the maternal COVID19 status that is most relevant.

### ***In light of COVID-19, Is the skin-to-skin policy at birth and postpartum the same? '***

The skin-to-skin policy at birth is the same. We encourage all of our patients to practice skin-to-skin given the numerous benefits for baby and mom.

### ***I've heard the COVID-19 testing has a 20-30% false negative rate, but UCSF is considering it clinically valid for these decisions?***

Polymerase Chain Reaction (PCR) for RNA tests are highly (>99%) sensitive and specific because they detect even small particles (nucleic acids) of the virus. This is the test we use to screen patients for COVID-19 at UCSF. However, the accuracy of this test also depends on 1) properly collected samples and 2) COVID-19 virus still in the body of the patient.

As COVID-19 illness runs its course, the amount of virus in a person's body starts to decrease, and the level of antibodies in the body should start to increase. This is what antibody testing aims to detect. You may be thinking of the wide variation in accuracy with this test, which, unfortunately, is true. However, UCSF has developed its own antibody test that is >99% accurate. But again, it is only used in special circumstances and not for routine screening.

### ***I just want to make sure that I heard correctly that ALL mothers going in for delivery will be tested for COVID-19? Is it the antibody test as well?***

We are currently recommending that the following patients undergo COVID-19 PCR RNA testing:

- 1) Patients admitted to the UCSF Birth Center
- 2) Patients undergoing planned procedures at the UCSF Birth Center (external cephalic version, etc.)

Mothers are tested with the PCR RNA swab. All admissions to our hospitals are tested on admission including expectant mothers. Currently, we are not offering antibody testing.

### ***Do parents need to bring a carseat into the hospital when admitted?***

Families should bring a carseat to the hospital. You do not necessarily have to bring it to the room when you are initially admitted (you can leave it in the car until the day of discharge or your support person can bring it).

### ***What is the breastfeeding policy if mom is COVID-19 positive?***

There is no known exposure to COVID-19 from breast milk. However, the concern with breastfeeding in these cases is the risk of transmission given close proximity between mom and baby. Mothers who are COVID-19 positive will have a discussion with the pediatric team to weigh the pros and cons of breastfeeding. There are significant pros, but there is a risk of transmission from respiratory droplets. If mothers elect to breastfeed, we recommend that they wear a surgical mask when breastfeeding and to practice good hand hygiene if/when handling breast pump parts and bottles.

### ***Is early discharge from postpartum recommended or forced?***

Early discharge is offered to families who qualify. On average, if mom and baby are meeting all of their goals and mom had a vaginal delivery, we may consider discharge on day one after delivery. If mom had a c-section and everyone is meeting goals, we may consider discharge on day three after delivery.

### ***Is UCSF still sending babies home with baby scales?***

We are sending some families home with scales, if follow up via telehealth is an appropriate plan for the baby (some babies need an in-person follow up visit rather than telehealth).

### ***Is the best way to protect the baby upon discharge to have them come downstairs in the car seat and put a blanket on the car seat since they can't be masked?***

We do not recommend using a mask for newborns or infants; keeping the infant in his or her carseat when you are in public (perhaps with a carseat cover or blanket loosely covering the carseat for short periods of travel) is likely a safe alternative.

### ***Are we given a first pediatric appointment on discharge from the hospital?***

We will help you determine the recommended timing for your first appointment prior to discharge, and if you are following up at UCSF, will help you schedule the appointment. All practices save appointment slots for newborns because we have no idea when they'll be born!

## Socialization and Visitors

### ***Can grandparents or family come visit us and help us with our newborn? What are recommendations around how long to wait before having grandparents visit from out of town?***

There is no easy answer to this question. Some of this depends on where your family is traveling from and your own risk tolerance. Airplane travel is likely high risk but it may not be possible to quarantine for 2 weeks. For most healthy babies and parents - the highest risk is to the grandparent.

Depending on the risk factors for the health of the grandparents, fourteen days from discharge is a general guideline. This helps minimize the risk of COVID exposure to grandparents if you have not had any symptoms.

We are considering whether to invite in family members or outside support for childcare in the days/weeks following the birth. Beyond the additional hygiene measures (mask, washing hands) is there a period of time where the baby is most susceptible to COVID-19? I've read the first two months are the most risky to the child's health.

Babies are more susceptible to any illness before one month; if you baby has a fever before one month, a more extensive work-up is indicated. However, there is no indication that there is an increased risk of COVID-19, in particular.

## Outpatient Pediatric Care

### ***Is the first well-baby visit in-person? When does it take place?***

Most often the first few visits are in-person. There are times when the first visit can be done via telehealth, but most often it is in-person.

The exact timing of the first newborn outpatient visit depends on the baby's age at discharge and on how the baby is doing with feeding, jaundice, etc. Typically, the first visit should take place 1-3 days after discharge from the hospital.

### ***Do vaccinations after birth follow the same schedule as pre-COVID-19?***

Vaccination recommendations are the same (we recommend the first dose of Hepatitis B during the birth hospitalization, and a group of vaccines at the two month visit).

If we are not delivering at UCSF, how do we get our first newborn appointment for pediatric care at UCSF?

After the baby is born, please call our practice for an appointment upon discharge from the hospital. We have next day appointments available for infants.

### ***What is the best brand recommendation for an in-home accurate reading thermometer for adult/baby/kid?***

We don't have a specific brand recommendation, but recommend either a rectal thermometer or an axillary (armpit) thermometer for measuring temperatures in infants. The forehead and ear-measuring thermometers are less accurate in young infants.

***I have questions about how to prepare for taking care of baby after I get home from the hospital and how to plan for support. Can I speak to a UCSF pediatrician before I deliver?***

Yes! We're happy to have a telehealth consultation with you prior to the birth of your baby if you have any questions about your baby's care and how to plan. Please call our office, (415) 885-7478, and request a telehealth appointment with one of our pediatricians.

***Are all of your pediatric clinic sites open at this time?***

Please see below for a list of our pediatric clinics and affiliated clinics:

[https://www.ucsfbenioffchildrens.org/clinics/primary\\_care/](https://www.ucsfbenioffchildrens.org/clinics/primary_care/)

UCSF Benioff Children's Hospital Pediatric Primary Care at Mt. Zion  
2330 Post St., Suite 320  
San Francisco, CA 94143-1660  
(415) 885-7478  
Monday through Friday 8:00 am-5:00 pm  
Well Care 3rd Floor  
Sick Care 2nd Floor

UCSF Benioff Children's Hospital Pediatric Primary Care at Mission Bay  
*\*Reopening July 2020\**  
1975 Fourth Street, 6th Floor  
San Francisco, CA 94158  
(415) 885-7478

There are other UCSF practices that see children.  
UCSF Lakeshore Family Medicine  
UCSF Primary Care Practices (China Basin and Laurel Village).

Finally there is an extensive network of private practice Pediatricians across the Bay Area that are affiliated with UCSF. You can find those locations at <http://www.ubcp.org/ubcp-contact-locations>