FAQs for Pregnant Healthcare Workers – COVID-19

Last updated 3/17/2020

Q: Is COVID-19 worse for pregnant women?

A: Not likely. It appears that pregnant women have the same type and level of symptoms as people who are not pregnant. The American College of Obstetrics and Gynecology (ACOG) states, “Currently available data on COVID-19 does not indicate that pregnant women are at increased risk.”


Q: Do pregnant women need to take any additional precautions?

A: No. “Pregnant women should take the same preventive actions to avoid infection recommended for all adults, such as avoiding close contact with anyone who is coughing and sneezing, washing hands often with soap and water or alcohol-based hand rub, covering mouth and nose with a tissue or elbow when coughing and sneezing, and thoroughly cooking meat and eggs,” per the United Nations Population Fund. https://www.unfpa.org/press/unfpa-statement-novel-coronavirus-covid-19-and-pregnancy

Q: Can my unborn baby get the coronavirus from me?

A: Likely, no. A recent study looked at samples taken from women who were infected with COVID-19 at the time of birth. There was no detectible COVID-19 in any sample of amniotic fluid, cord blood, neonate throat swabs, or breast milk. There is currently no evidence to suggest the virus can cross the placenta. https://www.sciencedirect.com/science/article/pii/S0140673620303603

Q: Should I exclude myself from caring for COVID-19 patients if I am pregnant?

A: No. The CDC says that healthcare workers who wear the appropriate personal protective equipment (PPE) are at a low risk of exposure.


ACOG does not currently recommend restricting pregnant HCW from known COVID patient Care.


The Society of Maternal Fetal Medicine’s guidelines are consistent with the CDC and ACOG.

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