The image contains a clinical approach to the management of COVID-19 in pregnancy and the newborn. It outlines procedures for suspected, confirmed, and probable COVID-19 patients, as well as instructions for term and preterm infants. The document includes guidelines on personal protective equipment (PPE), monitoring, and handling of specimens. It also provides recommendations for obstetric care, neonatal care, and postpartum care. The DISCLAMER section indicates that this guideline was formulated collaboratively and will be updated as more information becomes available.

Legend:
- PPE – Personal Protective Equipment; ACS – Antenatal Corticosteroids; PTL – Preterm Labor; RESU – Regional Epidemiology and Surveillance Unit.
- COVID-19 Delivery Team – Obstetrician (1-2); Pediatrician (1-2); Anesthesiologist (1); Nurse (1-2).
- Appropriate Personal Protective Equipment – 1. Well-fitting N95 mask (fit-tested); 2. Eye protection (goggles or face shield); 3. Impermeable gown; 4. Surgical gloves; 5. Shoe cover. The reader is referred to the Guidelines on Infection Control for COVID-19.
- Antenatal Surveillance – Growth monitoring, AFI with Ultrasound; Detailed anatomic scan at 18-24 weeks for infection acquired during 1st and early 2nd trimester.

DISCLAIMER: This guideline was formulated through a collaborative effort from the above professional societies mainly to guide clinicians who will be handling COVID-19 in this special population. The recommendations were made after careful review of currently available limited published data with the consensus of a panel of experts. We will be updating this guideline accordingly as more information becomes available as this disease is still evolving. This can be adopted and modified based on your institution’s capacity and standing policies.
References:


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TECHNICAL WORKING GROUP

(Front Row)
CHRISTIA S. PADOLINA, M.D. (President, POGS) middle
BENJAMIN D. CUENCA, M.D. (Vice-President, POGS) second to the left
ERWIN R. DE MESA, M.D. (President, PIDSOG) second to the right
MARIORIE I. SANTOS, M.D. (President, PSMFM) first from left
BELEN AMPARO E. VELASCO, M.D. (President, PSNBM), first from right

(Standing from left)

(Not in the picture)
SALVACION R. GATCHALIAN, M.D. (President, PPS), JOSELYN A. EUSEBIO, M.D. (Vice-President, PPS), MARY ANN C. BUNYI, M.D. (President, PIDSP), MARIA JULIETA VICTORIANO-GERMAR, M.D (POGS)