



GUIDELINES AND RECOMMENDATIONS

Guidance for Prevention and Control of Influenza in the Peri- and Postpartum Settings

Pregnant women have been shown to be at increased risk of hospitalization from complications secondary to influenza infection. Infection control measures for hospitalized pregnant and recently-delivered women and their infants are detailed below. These guidelines were developed for clinicians and public health officials. However, there are insufficient data on use of influenza antiviral drugs in pregnant or recently-delivered women, and CDC is unable to provide guidance on antiviral use in these persons.

Pre-Delivery

- Prior to delivery, hospitalized influenza-infected pregnant women should be placed on droplet precautions (www.cdc.gov/flu/professionals/infectioncontrol)
- Hospital visitors of influenza-infected pregnant women should receive infection control education on droplet precautions (www.cdc.gov/flu/professionals/infectioncontrol) and hand hygiene (www.cdc.gov/handhygiene) and should be asked to practice these measures during their hospital visit.

During Delivery

- Pregnant women with influenza in the labor and delivery suite should be placed on droplet precautions (www.cdc.gov/flu/professionals/infectioncontrol). The pregnant woman does not need to wear a mask during the time of delivery.
- After the infant is born, the mother should put on a surgical mask and then practice hand hygiene before handling the baby.
- All persons who come within 3 feet of the mother should wear a surgical mask and practice hand hygiene (www.cdc.gov/handhygiene) before and after contact with the mother.
- All persons in the delivery room should practice hand hygiene before and after handling the baby.

After Delivery

- **Rooming-in with Mother:** Newborn infants of influenza-infected mothers should stay in the same hospital room as the mother if possible, and should be housed in an isolette when available. The isolette should be placed at least 3 feet from the mother when she is not interacting with the baby.
- **Nursery:** If a newborn infant of an influenza-infected woman is housed in the hospital nursery instead of the mother's room, the infant should be placed on droplet precautions (www.cdc.gov/flu/professionals/infectioncontrol). The infant should be placed in a private room in the nursery, if available, and should be housed in an isolette when available. If a private room is not available in the nursery, the newborn should be kept 3 feet from other babies in the nursery and in an isolette when available.
- Hospital visitors of influenza-infected mothers and their infants should receive infection control education on droplet precautions (www.cdc.gov/flu/professionals/infectioncontrol) and hand hygiene (www.cdc.gov/handhygiene) and should be asked to practice these measures during their hospital visit.

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Breast Feeding by Influenza-infected Mothers

- Influenza-infected mothers who are breast feeding should put on a surgical mask and then practice hand hygiene (www.cdc.gov/handhygiene) before each feeding or other close contact with their infants. These practices should continue for each feeding during the 5-day period following the mother's symptom onset.

For more information, visit www.cdc.gov/flu or call the CDC Flu Information Line at (800) CDC-INFO (English and Spanish) or 888-232-6358 (TTY).

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