



Centers for Disease Control and Prevention **H1N1 Flu**  
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# Considerations for Pregnant Women who are More likely to be Exposed to Novel H1N1 Flu (Swine Flu) at work; Information for Women in Education, Child Care, and Health Care.

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This information is for pregnant women who work in jobs where they are more likely to be exposed to people with confirmed, probable, or suspected novel H1N1 virus infection.

## Schools and child care workers

Pregnant women working in school settings (e.g. teachers, day care workers) should follow the same guidance as nonpregnant school workers and the general public.

[H1N1 Flu \(Swine Flu\) and You \(http://www.cdc.gov/h1n1flu/swineflu\\_you.htm\)](http://www.cdc.gov/h1n1flu/swineflu_you.htm)

[Guidance for Schools K-12 \(http://www.cdc.gov/h1n1flu/k12\\_dismissal.htm\)](http://www.cdc.gov/h1n1flu/k12_dismissal.htm)

[Alert for institutions of higher learning \(http://www.cdc.gov/h1n1flu/college-alert.htm\)](http://www.cdc.gov/h1n1flu/college-alert.htm)

## Health care workers

All health care workers in direct patient care, including pregnant women, should follow standard precautions with all patients, regardless of infection status ([http://www.osha.gov/Publications/OSHA\\_pandemic\\_health.pdf](http://www.osha.gov/Publications/OSHA_pandemic_health.pdf) ([http://www.osha.gov/Publications/OSHA\\_pandemic\\_health.pdf](http://www.osha.gov/Publications/OSHA_pandemic_health.pdf)) (#linkPolicy), page 15).

Health care workers treating patients with suspected or known illness easily transmitted by contact, droplet, or airborne transmission (e.g. influenza viruses) should do a risk assessment to determine the type of transmission-based precautions needed. Contact, droplet, or airborne precautions may be indicated ([http://www.osha.gov/Publications/OSHA\\_pandemic\\_health.pdf](http://www.osha.gov/Publications/OSHA_pandemic_health.pdf) ([http://www.osha.gov/Publications/OSHA\\_pandemic\\_health.pdf](http://www.osha.gov/Publications/OSHA_pandemic_health.pdf)) (#linkPolicy), pages 16-17).

Pregnant women who will likely be in direct contact with patients with confirmed, probable, or suspected influenza A (H1N1) (e.g., a nurse, physician, or respiratory therapist caring for hospitalized patients), should consider reassignment to lower-risk activities, such as telephone triage.

If reassignment is not possible, pregnant women should avoid participating in procedures that may generate increased small-particle aerosols of respiratory secretions in patients with known or suspected influenza, including the following procedures:

- Endotracheal intubation
- Aerosolized or nebulized medication administration
- Diagnostic sputum induction
- Bronchoscopy
- Airway suctioning
- Positive pressure ventilation via face mask (e.g., BiPAP and CPAP)
- High-frequency oscillatory ventilation

Guidance on pre-exposure and post-exposure chemoprophylaxis with antiviral agents, including for pregnant women can be found at <http://www.cdc.gov/h1n1flu/recommendations.htm> (<http://www.cdc.gov/h1n1flu/recommendations.htm>).

For additional guidance for health care providers please visit [http://www.cdc.gov/h1n1flu/guidelines\\_infection\\_control.htm](http://www.cdc.gov/h1n1flu/guidelines_infection_control.htm) ([http://www.cdc.gov/h1n1flu/guidelines\\_infection\\_control.htm](http://www.cdc.gov/h1n1flu/guidelines_infection_control.htm)).

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