UCSF Medical Center
UCSF Benioff Children's Hospital

Last Reviewed: 11/2025

# Pregnant Healthcare Workers Infectious Exposure Guidance

## I. PURPOSE OF THE GUIDANCE

To provide guidance for pregnant healthcare workers to minimize the risk of acquiring infections that may be harmful to their fetus in the healthcare setting.

## II. REFERENCES

A. CDC Special Populations: Pregnant Healthcare Personnel

B. CDC Reproductive Health and the Workplace

C. CDC About Exposures and Reproductive Health

## III. DEFINITIONS

A. **Standard Precautions** are the basic practices that apply to all patient care in all settings where healthcare is delivered, regardless of the patient's diagnosis or suspected or confirmed infection status. These include: hand hygiene; use of gloves, gown, mask, eye protection, or face shield, depending on the anticipated exposure; and safe injection practices. The application of Standard Precautions during patient care is determined by the nature of the healthcare worker-patient interaction and the extent of anticipated blood, body fluid, or pathogen exposure. For more information refer to this policy.

B. **Transmission-Based Precautions** are designed for patients with suspected and/or confirmed infection or colonization with organisms that require practices in addition to Standard Precautions to prevent transmission. For more information refer to this policy.

## IV. GUIDANCE

A. All patients, even those without a specific infectious diagnosis, can harbor and transmit infections to others. Adhering to practices aimed at preventing transmission of infections from patients to healthcare workers is essential for all healthcare workers.

Healthcare workers who are pregnant and those planning to become pregnant should seek counseling from their OB provider on the transmission of diseases and on the recommended infection prevention and control measures to prevent transmission. Some infections, are of particular concern for pregnant healthcare workers because they may make the person at higher risk for complications and/or pose a risk to the developing fetus.

Given this, all healthcare workers, including those who are pregnant must:

- Adhere to **Standard Precautions**, including diligent hand hygiene for ALL patient encounters and use of gloves and mask/eye protection when appropriate
- Additionally, follow the appropriate **Transmission-Based precautions** for patients who are on Droplet, Contact, Enteric Contact, Airborne, or Novel Respiratory Isolation

- The Transmission-Based Precautions recommendations table to prevent occupational exposures is found here.

- Ensure that their **vaccinations** are up to date
- **Know their immune status** when applicable (e.g., varicella, measles, rubella, hepatitis B). Individuals who have immunity will remain immune when pregnant.

**We do not recommend routinely excluding healthcare personnel on the basis of their pregnancy or intent to become pregnant from the care of patients that have the potential for harming the fetus (e.g. Cytomegalovirus (CMV), Human Immunodeficiency Virus (HIV), hepatitis B and C, herpes simplex, rubella, and varicella).**

However, if work restrictions are present, the University shall engage in the interactive process to evaluate any accommodations needed.[1]

If a pregnant healthcare worker has been exposed, they should contact Occupational Health Services (or after hours by calling 415-353-STIC (7842)) and their OB provider right away for evaluation and for those that are non-immune, to assess the need for post exposure prophylaxis if available (i.e. varicella, measles).

Pregnant healthcare workers should contact their OB provider for more information about risk during pregnancy.

The following table addresses the most common pathogens that raise concerns for pregnant women; however, covering all potential agents of concern including new and emerging pathogens[3] is beyond the scope of this guideline:

| Infection | Isolation | Standard Precautions is required when caring for all patients including for those with the infections below: |
|---|---|---|
| **Primary varicella (Chickenpox)/ Disseminated Zoster** | Airborne[2] and Contact | Know your varicella immune status. Varicella vaccine is recommended for **non-immune non-pregnant, eligible** healthcare workers without reliable history of varicella or laboratory evidence of immunity. The varicella vaccine *should not* be given to pregnant healthcare workers and those planning on getting pregnant within the next 4 weeks.<br><br>1. If immune to varicella, follow the Airborne and Contact Isolation signage.<br>2. If not immune to varicella, do not care for patients with suspected or confirmed primary varicella or disseminated zoster. This applies to both pregnant and non-pregnant healthcare workers. Report any exposures immediately. |
| **Cytomegalovirus (CMV)** | Standard | Transmission occurs through direct contact with body fluids (including blood, urine, saliva). Adhering to Standard Precautions, especially hand hygiene, glove use when touching blood and other body fluids, and a mask and eye protection when appropriate will prevent transmission of CMV. Most transmission occurs from individuals who are asymptomatic or unidentified CMV excretors. |
| **Hepatitis B** | Standard | The hepatitis B vaccine is recommended for all healthcare workers. Prevent blood exposures by following Standard Precautions and by using safety devices correctly (e.g. safety-engineered sharps). Report any exposures immediately. |
| **Hepatitis C** | Standard | Prevent blood exposures by following Standard Precautions and by using safety devices correctly (e.g. safety-engineered sharps). Report any exposures immediately. |

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| **Herpes simplex** | Standard except for Contact for neonatal, severe disseminated or muco-cutaneous | This infection is not usually spread in the healthcare setting. Infection can potentially occur through direct contact with the uncrusted vesicular rash. Adhering to Standard Precautions, especially hand hygiene and glove use when touching the rash or any open skin lesions will prevent transmission. |
| **Measles** | Airborne[2] | Know your measles immune status. Measles vaccine is recommended for **non-immune non-pregnant, eligible,** healthcare workers. The measles vaccine should not be given to pregnant healthcare workers and those planning on getting pregnant within the next 4 weeks.<br>1. If immune to measles, follow the Airborne Isolation signage.<br>2. If not immune to measles, do not care for patients with suspected or confirmed measles. This applies to both pregnant and non-pregnant healthcare workers. Report any exposures immediately. |

**Footnotes**

1. Contact the UCSF Disability Management Services (DMS) to initiate this process.
   - Additional information available through the State of California Civil Rights Department and other languages available here.
2. Changes in facial contours, which may occur during pregnancy, pose a potential for fit-failure of N95 respirator to which the individual was previously successfully fitted. For this reason, pregnant healthcare workers are encouraged to repeat the fit test for safe use of a N95 respirator, if the need arises. Alternatively, pregnant healthcare workers may find use of a purified air powered respirator (PAPR) more comfortable.
3. Pregnant healthcare workers should be excluded from the care of patients with possible or proven Ebola.

## V. RESPONSIBILITY

A. Questions about this guidance should be directed to the healthcare workers OB provider and Occupational Health Services.

## VI. HISTORY OF POLICY

A. Revised 8/92, 10/96, 3/98, 2/01, 4/10, 4/13, 5/14, 3/16, 1/19, 7/22, 11/25

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