

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
<i>This document will be continually updated throughout the month of April, approximately every four days.</i>							
Children, screening, severe disease, Europe, Spain	8-Apr-20	Screening and Severity of Coronavirus Disease 2019 (COVID-19) in Children in Madrid, Spain	JAMA Pediatrics	Research Letter	Europe has displaced Asia as the epicenter of the COVID-19 pandemic. Authors identified 41 children of 4695 confirmed cases in a testing registry from 30 hospitals in Madrid, Spain, between March 2 and March 16, 2020. The median age of tested patients was 3 years, and the median age of patients with positive results was 1 year. Twenty-five of 41 children with confirmed COVID-19 (60%) were hospitalized, 4 of 41 (9.7%) were admitted to a pediatric intensive care unit (PICU), and 4 of 41 (9.7%) needed respiratory support beyond nasal prongs. Of these, 1 of 4 (25%) had only 1 previous condition (recurrent wheezing). No patients died. The most common initial syndromic diagnoses were upper respiratory tract infection and fever without a source. Two patients (5%) had a coinfection with influenza B.	Compared to 2.8% of children with confirmed COVID-19 in China who had severe or critical disease, in Madrid, 60% of confirmed infections in children required hospitalization, aligning with criteria for severe disease. However, testing protocols may have biased results to moderate to severe patients.	Tagarro A, Epalza C, Santos M, et al. Screening and Severity of Coronavirus Disease 2019 (COVID-19) in Children in Madrid, Spain. JAMA Pediatr. Published online April 08, 2020. doi:10.1001/jamapediatrics.2020.1346
Community transmission, family gatherings, Chicago, IL	8-Apr-20	Community Transmission of SARS-CoV-2 at Two Family Gatherings — Chicago, Illinois, February–March 2020	Morbidity and Mortality Weekly Report	Report	Early reports of person-to-person transmission of SARS-CoV-2 have been among household contacts, health care workers, and within congregate living facilities. Investigation of COVID-19 cases in Chicago identified a cluster of 16 confirmed or probable cases, including three deaths, likely resulting from one introduction. Extended family gatherings including a funeral and a birthday party likely facilitated transmission of SARS-CoV-2 in this cluster. U.S. residents should adhere to CDC recommendations for social distancing, avoid gatherings, and follow stay-at-home orders when required by state or local authorities.	Beyond immediate family clusters, community transmission has occurred between non-household contacts at family gatherings.	Ghinai I, Woods S, Ritger KA, et al. Community Transmission of SARS-CoV-2 at Two Family Gatherings — Chicago, Illinois, February–March 2020. MMWR Morb Mortal Wkly Rep. ePub: 8 April 2020. DOI: http://dx.doi.org/10.15585/mmwr.mm6915e1
Maternal and perinatal outcomes, pregnancy, systematic review	7-Apr-20	Maternal and Perinatal Outcomes With COVID-19: A Systematic Review of 108 Pregnancies	Acta Obstetrica et Gynecologica Scandinavica	Systematic Review	This systematic review searched databases for all case reports and series of COVID-19 in pregnant women and neonates from February 12 to April 4, 2020. Eighteen articles reporting data from 108 pregnancies were included. Most reports described women presenting in the third trimester with fever (68%) and coughing (34%). Lymphocytopenia (59%) with elevated C-reactive protein (70%) was observed and 91% were delivered by cesarean section. Three maternal intensive care unit admissions were noted but no maternal deaths. One neonatal death and one intrauterine death were also reported.	Although the majority of mothers were discharged without any major complications, severe maternal morbidity as a result of COVID-19 and perinatal deaths were reported. Vertical transmission of the COVID-19 could not be ruled out.	Zaigham M, Andersson O. Maternal and Perinatal Outcomes with COVID-19: a systematic review of 108 pregnancies [published online ahead of print, 2020 Apr 7]. Acta Obstet Gynecol Scand. 2020. doi:10.1111/aogs.13867
Children, clinical characteristics, China	7-Apr-20	Novel Coronavirus Infection in Children Outside of Wuhan, China	Pediatric Pulmonology	Original Article	This retrospective and the single-center study identified all hospitalized children diagnosed with COVID-19 between January 8 and February 19, 2020 at the Public Health Clinic Center of Changsha, Hunan, China. Six children had a family exposure. The initial symptoms of the nine children were mild, including fever (3/9), diarrhea (2/9), cough (1/9), and sore throat (1/9), two had no symptoms. Two of the enrolled patients showed small ground-glass opacity of chest computed tomography scan. As of February 26, six patients had a negative RT-PCR for 2019-nCoV and were discharged. The median time from exposure to a negative RT-PCR was 14 days.	The clinical symptoms of the new coronavirus infection in children were not typical and showed a less aggressive clinical course than teenage and adult patients. Children who have a familial clustering should be reported to ensure a timely diagnosis.	Shen Q, Guo W, Guo T, et al. Novel coronavirus infection in children outside of Wuhan, China [published online ahead of print, 2020 Apr 7]. Pediatr Pulmonol. 2020. doi:10.1002/ppul.24762

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Nutritional management, malnutrition, meal provision, hospital setting	6-Apr-20	Nutritional Management in Hospital Setting During SARS-CoV-2 Pandemic: A Real-Life Experience	European Journal of Clinical Nutrition	Correspondence	Little is known regarding nutritional support during hospital stay. Lack of nutritional procedures could, in turn, prolong patients' recovery and increase further infectious complications. To better plan the nutritional management of this hospital emergency, this institution's strategy focuses on promoting nutritional support to COVID-19 patients and meal supply for healthcare professionals. Key considerations include increased energy expenditure related to fever and respiratory distress, reduced muscle mass from isolation in small areas and bed rest, the already under-recognized and undertreated status of malnutrition in hospital wards, which may worsen during a pandemic. A personalized meal provision plan has begun for oral-feedable COVID-19 patients, while those unable to eat are supported with high protein/low glucose Enteral and Parenteral Nutrition formulas. In recent Chinese experience, nutritional support was part of the multidisciplinary management for symptomatic SARS-CoV-2 affected patients.	This strategy from the Fondazione Policlinico A. Gemelli-IRCCS (regional COVID-19 reference center) of Rome, Italy recommends that clinical nutritionists plan specific interventions in their hospital to pay care to the nutritional status of isolated and fragile COVID-19 patients.	Cintoni M, Rinninella E, Annetta MG, Mele MC. Nutritional management in hospital setting during SARS-CoV-2 pandemic: a real-life experience [published online ahead of print, 2020 Apr 6]. <i>Eur J Clin Nutr.</i> 2020. doi:10.1038/s41430-020-0625-4
Breastfeeding, expressed mother's milk, neonatology, neonatal management, mother-infant relationship	6-Apr-20	Breast Feeding at the Time of COVID-19: Do Not Forget Expressed Mother's Milk, Please	Archives of Disease in Children: Fetal & Neonatal Edition	Letter	This letter responds to a recent commentary by Li et al. promoting the isolation of all infants with suspected COVID-19 regardless of whether or not they present with symptoms, without details on the management of newborn infant feeding. Other Chinese colleagues have discouraged against the use of expressed breast milk for infants with suspected COVID-19. In Switzerland, Favre et al. suggested the avoidance of direct breastfeeding by COVID-19 positive mothers, due to intimate contact and potential aerosol transmission during feeds. However, it is important to consider that the primary concern for risk of transmission is by respiratory droplets, which can be mitigated through basic preventive measures, not by breastmilk. Second, the practice of routine separate of the newborn infant from her mother penalizes the mother-baby relationship. Finally, the use of expressed mother's milk should be considered as a second choice, to rescue the benefits of nutrition from mother's milk, whenever direct breastfeeding is not recommended. Lastly, in light of limited evidence, breastmilk may contain specific antibodies possibly modulating an eventual SARS-CoV-2.	Protocols applied in maternity hospitals to prevent COVID-19 should consider the promotion of breastfeeding without disregarding the feasible option of expressing mother's milk.	Davanzo R. Breast feeding at the time of COVID-19: do not forget expressed mother's milk, please [published online ahead of print, 2020 Apr 6]. <i>Arch Dis Child Fetal Neonatal Ed.</i> 2020. doi:10.1136/archdischild-2020-319149
Pauci-symptomatic infant, epidemic settings	6-Apr-20	COVID-19 Infection in a Pauci-symptomatic Infant: Raising the Index of Suspicion in Epidemic Settings	Pediatric Pulmonology	Case Report	It is unclear whether children are less likely to be infected by COVID-19 or rather display fewer symptoms. This case report describes a 32-day-old boy infected by COVID-19 that presented with an upper airway infection, which resolved spontaneously and did not require any therapy. Authors argue that in epidemic settings children presenting with any mild symptom potentially attributable to COVID-19 should be considered contagious until proven otherwise, and that management must be guided by clinical conditions.	Caution dictates that children should be considered as contagious as adults, despite mild presentation. As opposed to other authors, they advocate against routine CT scans in children.	Canarutto D, Priolo A, Russo G, Pitea M, Vigone MC, Barera G. COVID-19 infection in a paucisymptomatic infant: Raising the index of suspicion in epidemic settings [published online ahead of print, 2020 Apr 6]. <i>Pediatr Pulmonol.</i> 2020. doi:10.1002/ppul.24754

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Children vs. adults, comparative analysis, China	6-Apr-20	A Comparative-Descriptive Analysis of Clinical Characteristics in 2019-Coronavirus-infected Children and Adults	Journal of Medical Virology	Research Article	The purpose of the current study is to comparatively analyze the clinical characteristics of 2019-nCoV infection in children and adults and to explore the possible causes for present discrepancies. The medical records of 25 adults and 7 children with confirmed cases of 2019-nCoV ARD, managed at Xian eighth hospital in Shaanxi, China from January 31 to February 16, 2020, were reviewed retrospectively. All children were from family clusters. The median incubation period of children and adults was 5 days (range 3-12 days) and 4 days (range 2-12 days), respectively. Diarrhea and/or vomiting (57.1%) were more common in children, whereas for adults it was myalgia or fatigue (52%). On admission, the percentage of children having pneumonia (5, 71.4%) was roughly the same as adults (20, 80%). 20% of adults had leukopenia, but leukocytosis was more frequently in children (28.6%, P=0.014). A higher number of children had elevated creatine kinase isoenzyme (57.1% vs. 4%, P=0.004). Antiviral therapy was given to all adult patients but to none of the children.	This study adds to growing research that describes differences in clinical manifestations of COVID-19 infection in children and adults, by conducting comparative analysis of clinical parameters between these two groups, to guide future age-specific diagnosis and treatment.	Han YN, Feng ZW, Sun LN, et al. A comparative-descriptive analysis of clinical characteristics in 2019-Coronavirus-infected children and adults [published online ahead of print, 2020 Apr 6]. J Med Virol. 2020. doi:10.1002/jmv.25835
Children, newborn, infants, clinical characteristics, epidemiology, Korea	6-Apr-20	Epidemiology and Clinical Features of Coronavirus Disease 2019 in Children	Clinical and Experimental Pediatrics	Review Article	Pediatric COVID-19 accounts for a small percentage of patients with outbreaks and is often milder than adults but can progress to severe disease in some cases. Even neonates can suffer from COVID-19, and children may play a role as a spreader in the community. In this review, authors summarize what is known about COVID-19 in children and adolescents until now.	This is a detailed review of all published data, to date, on clinical and epidemiological features of cases of COVID-19 in neonates, infants, and children, within and outside of China since the start of the outbreak.	Choi SH, Kim HW, Kang JM, Kim DH, Cho EY. Epidemiology and Clinical Features of Coronavirus disease 2019 in Children [published online ahead of print, 2020 Apr 6]. Clin Exp Pediatr. 2020;10.3345/cep.2020.00535. doi:10.3345/cep.2020.00535
Pediatrics, epidemiology, children vs. adults, symptomology, hospitalization, United States, CDC	6-Apr-20	Coronavirus Disease 2019 in Children - United States, February 12 - April 2, 2020	Morbidity and Mortality Weekly Report	Report	In this preliminary description of 2572 pediatric U.S. COVID-19 cases (occurring during Feb 12 - April 2, 2020), 5.7% of children (aged <18 years) with COVID-19 were hospitalized. 73% of children reportedly experienced fever, cough, or shortness of breath, compared to 93% of adults (aged 18-64 years). Severe outcomes have been reported in children, including 3 deaths. These data support research from China that suggest that pediatric COVID-19 cases might be less severe than cases in adults and that children might experience different symptoms than adults. Social distancing and everyday preventive behaviors remain important for all age groups because asymptomatic patients and those with less serious illness play important roles in disease transmission.	This is the first analysis of disease characteristics of pediatric cases in the U.S. Figures are included in the report.	Coronavirus Disease 2019 in Children — United States, February 12–April 2, 2020. MMWR Morb Mortal Wkly Rep. ePub: 6 April 2020. DOI: http://dx.doi.org/10.15585/mmwr.mm6914e4external icon

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Breastfeeding indications, Italy, Europe	3-Apr-20	Breastfeeding and Coronavirus Disease-2019. Ad interim indications of the Italian Society of Neonatology endorsed by the Union of European Neonatal & Perinatal Societies.	Maternal & Child Nutrition	Review Article	Recommendations from the Italian Society of Neonatology indicate that for a mother with suspected or confirmed COVID-19 who is asymptomatic or pauci-symptomatic at delivery, rooming-in is feasible and direct breastfeeding is advisable under strict measures of infection control. However, when a mother with COVID-19 is too sick to care for the newborn, the neonate should be managed separately and fed fresh expressed breast milk, with no need to pasteurize it since human milk is not believed to be a vehicle of COVID-19. This guidance is subject to change.	Recommendations from Italy align with WHO guidelines surrounding breastfeeding with COVID-19.	Davanzo R, Moro G, Sandri F, Agosti M, Moretti C, Mosca F. Breastfeeding and Coronavirus Disease-2019. Ad interim indications of the Italian Society of Neonatology endorsed by the Union of European Neonatal & Perinatal Societies [published online ahead of print, 2020 Apr 3]. <i>Matern Child Nutr.</i> 2020;e13010. doi:10.1111/mcn.13010
Pediatric pulmonology, underlying lung disease, cystic fibrosis, asthma, asymptomatic presentation	3-Apr-20	Lessons unfolding from pediatric cases of COVID-19 disease caused by SARS-CoV-2 infection.	Pediatric Pulmonology	Editorial	Total numbers of symptomatic pediatric cases lag dramatically behind adult cases, suggesting a protective effect of age. Theories explaining this effect include differences in pediatric immune response or differences in airway epithelial cell make-up, affecting the availability of viral binding sites. With regard to highly vulnerable patients with underlying lung disease, cystic fibrosis (CF) is rare in the Chinese populations, so the effect of COVID-19 on CF patients remains to be seen. Minimizing cough related to asthma could reduce the potential aerosolization of the virus in an asymptomatic carrier. Since children are more likely to be asymptomatic and are less likely to report symptoms of COVID-19, focusing on the pediatric population to prevent disease spread is critical.	Perspectives from pediatric pulmonologists on how to care for patients emphasize caring for the most vulnerable with underlying lung disease.	Yonker LM, Shen K, Kinane TB. Lessons unfolding from pediatric cases of COVID-19 disease caused by SARS-CoV-2 infection [published online ahead of print, 2020 Apr 3]. <i>Pediatr Pulmonol.</i> 2020. doi:10.1002/ppul.24748
Child, isolation period, respiratory viral shedding, China	3-Apr-20	The isolation period should be longer: Lesson from a child infected with SARS-CoV-2 in Chongqing, China.	Pediatric Pulmonology	Case Report	A 7-year-old child with SARS-CoV-2 infection in Chongqing, outside of Wuhan, Hubei province, was reported following the rapid spread of disease. This case suggested that children infected with SARS-CoV-2 are more likely to present milder manifestations than adults, thus children serve as potential sources of infection. The RT-PCR assay results for SARS-CoV-2 in the child's throat swab samples consistently tested positive over a course of 20 days, suggesting a prolonged period of viral shedding in children, which may call for an isolation period for suspected child cases that is longer than 14 days.	Another report on prolonged shedding of viral nucleic acid in throat samples from children suggests that longer isolation periods (>14 days) may be needed for suspected pediatric cases.	Lin J, Duan J, Tan T, Fu Z, Dai J. The isolation period should be longer: Lesson from a child infected with SARS-CoV-2 in Chongqing, China [published online ahead of print, 2020 Apr 3]. <i>Pediatr Pulmonol.</i> 2020. doi:10.1002/ppul.24763
Breastfeeding, donor milk, donor milk banking, breast pump, surface contamination, disinfection	3-Apr-20	Safe Handling of Containers of Expressed Human Milk in all Settings During the SARS-CoV-2 (COVID-19) Pandemic	Journal of Human Lactation	Insights into Practice and Policy	COVID-19 virus contaminates surfaces from respiratory droplet spread. For known coronaviruses, viral lifespan ranges up to 9 days, depending on volume of inoculation, material inoculated, temperature, and humidity. van Doremalen et al. (2020) found that SARS-CoV-2 was more stable on plastic and stainless steel than on copper and cardboard; viable virus was detected up to 72 hours after application to these surfaces although the virus titer was greatly reduced. Since mothers express their milk into a variety of plastic or glass containers, inadvertent viral spread	This report provides detailed information on recommended disinfection procedures for breast milk containers, among other hygiene precautions for mothers expressing milk.	Marinelli KA, Lawrence RM. Safe Handling of Containers of Expressed Human Milk in all Settings During the SARS-CoV-2 (COVID-19) Pandemic [published online ahead of print, 2020 Apr 3]. <i>J Hum Lact.</i> 2020. doi:10.1177/0890334420919083

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					must be avoided during container transfer to milk banks or other locations, through handwashing guidelines before and after expressing milk. Containers must be disinfected after milk expression with viricidal agents or appropriate bleach solutions (such as "high level disinfection" of 0.5% sodium hypochlorite solution, according to WHO) before storage in milk banks, hospital wards, day care centers, or similar locations.		
Children, inflammatory response, cytokine storm	3-Apr-20	COVID-19 in children and altered inflammatory responses	Nature Pediatric Research	Editorial	Possible reasons for differences in severity of disease between adults and children may relate to receptors in the Renin-angiotensin system (RAS) and altered inflammatory responses to pathogens. Studies of pediatric septic shock have shown differences in gene profiles, transcriptomic response, and the ontogeny of cytokine production, which provide infants and children with protection from pathogens with reduced cytokine storms. Information on individualized immune response as well as further understanding of sepsis and immune responses in different age groups would be useful to initiate targeted immunotherapies.	This article relates the evolving conversation around the role of immune response in COVID-19 to the pediatric population, offering additional explanations for age-related differences in severity of disease.	Molloy, E.J., Bearer, C.F. COVID-19 in children and altered inflammatory responses. <i>Pediatr Res.</i> 2020. https://doi.org/10.1038/s41390-020-0881-y
Pediatrics, pediatricians, underlying illness	3-Apr-20	Coronavirus Disease 2019 and Children: What Pediatric Health Care Clinicians Need to Know	JAMA Pediatrics	Viewpoint	Children are typically more susceptible to influenza complications but have experienced lower-than-expected rates of COVID-19, which may be due to decreased exposure to the virus, decreased infection due to immunity to other coronaviruses, or decreased likelihood of illness even when infected. Clinical symptoms of COVID-19 appear similar to those in adults, and infection from asymptomatic children is possible. Underlying illness, like asthma, may increase children's susceptibility to disease. Pediatric health care clinicians should make accommodations to minimize exposures for children with special health care needs, as well as advocating to limit the expansion of health disparities, for example, by finding ways to maintain nutrition for those dependent on school lunches.	A review of what is currently known about COVID-19 in children calls for pediatricians to take an active stance in advocating for child needs, such as nutritional support.	Rasmussen SA, Thompson LA. Coronavirus Disease 2019 and Children: What Pediatric Health Care Clinicians Need to Know [published online ahead of print, 2020 Apr 3]. <i>JAMA Pediatr.</i> 2020. doi:10.1001/jamapediatrics.2020.1224
Vitamin D supplementation, Vitamin C, ascorbic acid, cathelicidin, prevention, influenza	2-Apr-20	Evidence That Vitamin D Supplementation Could Reduce Risk of Influenza and COVID-19 Infections and Deaths	Nutrients	Review	This article reviews the role of vitamin D in reducing the risk of respiratory tract infections, namely influenza, through mechanisms like inducing cathelicidins and defensins that can lower viral replication rates and reducing concentrations of pro-inflammatory cytokines that produce the cytokine storm. Evidence supporting the role of vitamin D in reducing risk of COVID-19 includes that the outbreak occurred in winter, a time when 25-hydroxyvitamin D (25(OH)D) concentrations are lowest; that the number of cases in the Southern Hemisphere near the end of summer are low; that vitamin D deficiency has been found to contribute to acute respiratory distress syndrome; and that case-fatality rates increase with age and with chronic disease comorbidity, both of which are associated with lower 25(OH)D concentration. To reduce risk of infection, it is recommended that	Based on literature related to Vitamin D supplementation and influenza, authors recommend Vitamin D supplementation to reduce risk for COVID-19 infection. RCTs and large population studies must be conducted to evaluate these recommendations.	Grant WB, Lahore H, McDonnell SL, et al. Evidence that Vitamin D Supplementation Could Reduce Risk of Influenza and COVID-19 Infections and Deaths. <i>Nutrients.</i> 2020;12(4):E988. Published 2020 Apr 2. doi:10.3390/nu12040988

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					people at risk of influenza and/or COVID-19 consider Vitamin D supplementation. Higher doses may be useful for treatment of COVID-19 as well.		
Pediatrics, detection, China	2-Apr-20	Detection of Covid-19 in Children in Early January 2020 in Wuhan, China.	New England Journal of Medicine	Correspondence	Authors conducted a retrospective analysis of 366 hospitalized children (≤ 16 years) at three branches of Tongji Hospital in Wuhan, from January 7 to January 15, 2020. The most frequently detected pathogens in children were influenza A virus (in 23 patients [6.3%]) and influenza B virus (in 20 [5.5%]). SARS-CoV-2, the virus that causes Covid-19, was detected in 6 patients (1.6%). All six children had previously been completely healthy. Laboratory investigations showed that the levels of lymphocytes, white cells, and neutrophils were below the normal range in six, four, and three patients, respectively. Four of the six patients had pneumonia, as assessed radiographically by CT scan. One child was admitted to the pediatric intensive care unit and received pooled immune globulin from healthy donors. All the patients were treated empirically with antiviral agents, antibiotic agents, and supportive therapies. All patients recovered after hospitalization for a median of 7.5 days	Findings from this retrospective analysis indicate that SARS-CoV-2 infections in children were occurring early in the epidemic.	Liu W, Zhang Q, Chen J, et al. Detection of Covid-19 in Children in Early January 2020 in Wuhan, China. <i>N Engl J Med</i> . 2020;382(14):1370–1371. doi:10.1056/NEJMc2003717
Vertical transmission, pregnancy, neonatal infection	2-Apr-20	Vertical Transmission of Coronavirus Disease 19 (COVID-19) From Infected Pregnant Mothers to Neonates: A Review	Fetal and Pediatric Pathology	Review	Authors reviewed the risk of vertical transmission of COVID-19 by using data from published articles or official websites up to March 4, 2020. A total of 31 infected pregnant mothers with COVID-19 from Iran and China were reported. No COVID-19 infection was detected in their neonates or placentas. Two mothers died from COVID-19-related respiratory complications after delivery. Based on currently limited data, there is no evidence for intrauterine transmission of COVID-19 from infected pregnant women to their fetuses. Mothers may be at increased risk for more severe respiratory complications.	This review of current literature on vertical transmission suggests a lack of evidence for intrauterine transmission.	Karimi-Zarchi M, Neamatzadeh H, Dastgheib SA, et al. Vertical Transmission of Coronavirus Disease 19 (COVID-19) from Infected Pregnant Mothers to Neonates: A Review [published online ahead of print, 2020 Apr 2]. <i>Fetal Pediatr Pathol</i> . 2020;1–5. doi:10.1080/15513815.2020.1747120
Neonatal infection, sepsis, family cluster	1-Apr-20	Novel coronavirus in a 15-day-old neonate with clinical signs of sepsis, a case report	Infectious Diseases	Case Report	A 15-day-old neonate was admitted with fever, lethargy, cutaneous mottling, and respiratory distress without cough. His mother had symptoms of Novel coronavirus. RT-PCR assay was performed, and the neonate's pharyngeal sample tested positive for SARS-CoV-2. Blood, urine, and stool cultures were negative. The newborn was isolated and subjected to supportive care. Antibiotic and antiviral treatment was initiated. Eventually, the neonate was discharged in good general condition.	This case report adds to literature on early-onset SARS-CoV-2 in neonates, with exposure from parent(s).	Kamali Aghdam M, Jafari N, Eftekhari K. Novel coronavirus in a 15-day-old neonate with clinical signs of sepsis, a case report [published online ahead of print, 2020 Apr 1]. <i>Infect Dis (Lond)</i> . 2020;1–3. doi:10.1080/23744235.2020.1747634
NICU, donor milk bank, breastfeeding, skin-to-skin contact, United States, CDC, WHO	1-Apr-20	U.S. NICUs and Donor Milk Banks Brace for COVID-19	Lancet Child & Adolescent Health	Reflections	On March 28, 2020, the first infant death of the U.S. outbreak was announced in Illinois. The U.S. CDC recommends separating newborns from mothers with suspected or confirmed COVID-19. Disruptions in breastfeeding could increase babies' risk of developing necrotizing enterocolitis (NEC), a life-threatening gastrointestinal emergency that can lead to gut perforation and	This article introduces various concerns related to breastfeeding, supply of donor breast milk, restrictions on skin-to-skin touch for newborns in	Furlow, B. US NICUs and donor milk banks brace for COVID-19. <i>Lancet Child & Adol Health</i> . 2020. https://doi.org/10.1016/S2352-4642(20)30103-6

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					sepsis. Hospital visitor restrictions have further reduced newborns' opportunities for skin-to-skin touch and holding. In contrast with the CDC, WHO guidance on breastfeeding suggests that women with COVID-19 should breastfeed their newborns if they want to do so, while emphasizing respiratory hygiene (mask wearing, handwashing). Pasteurized donor milk is a vital resource for babies in NICUs whose mothers cannot provide breast milk, but donor supplies have become a concern as states and cities issue stay-at-home orders. Hospitals have begun precautionary rationing, allocating donor milk to the smallest and most at-risk preterm infants to prevent NEC.	NICUs, in the context of the U.S. outbreak. Importantly, the piece notes that human milk lowers risk for necrotizing enterocolitis in newborns, thus disruptions in breastfeeding may lead to GI emergencies.	
Infant, isolation room, personal protective equipment, breastfeeding, hygiene precautions	1-Apr-20	Environment and Personal Protective Equipment Tests for SARS-CoV-2 in the Isolation Room of an Infant With Infection.	Annals of Internal Medicine	Letter	SARS-CoV-2 is suspected to spread from an infected person to a susceptible host primarily through droplets and possibly direct contact. The roles of transmission by indirect contact (fomites) or by long-range airborne route are uncertain. In this letter, authors investigate environmental contamination and potential for transmission from a 6-month-old infant with COVID-19, admitted for isolation. The isolation environment and PPE of a health care worker were sampled and tested using PCR. The infant's bedding, cot rail, and table (where baby formula and wipes were placed) situated 1 meter away were found to be positive for SARS-CoV-2, confirming that an infant with COVID-19 but without respiratory symptoms can contaminate the environment with PCR-detectable virus, through crying or drooling. There was a downward trend of viral load with increasing distance from the infant. Despite close physical contact with the infant during feeding, no evidence of SARS-CoV-2 was detected on the health care worker's gown.	Findings suggest that even generally well infants, positive for SARS-CoV-2 with no respiratory symptoms, can easily contaminate nearby environments. This letter reaffirms the importance of hand hygiene when feeding and caring for infants with COVID-19 to reduce environmental virus contamination.	Yung CF, Kam KQ, Wong MSY, et al. Environment and Personal Protective Equipment Tests for SARS-CoV-2 in the Isolation Room of an Infant With Infection [published online ahead of print, 2020 Apr 1]. Ann Intern Med. 2020;M20-0942. doi:10.7326/M20-0942