

Key Terms	Date Published	Title	Journal / Source	Type of Publication	Summary & Key Points	Specific Observations	Full Citation
Infant, viral load, nasopharynx, breastmilk sample	28-Feb-20	<a href="#">A Well Infant with Coronavirus Disease 2019 (COVID-19) with High Viral Load</a>	Clinical Infectious Diseases	Brief Report	A well 6-month-old boy was referred to KK Women's and Children's Hospital (KKH) on February 4, 2020, and a nasopharyngeal specimen taken on admission and tested by RT-PCR confirmed the diagnosis of COVID-19 infection. His mother's symptoms started on January 29, 2020 and the first nasopharyngeal swab on February 3, 2020 was positive for SARS-CoV-2. Breastmilk samples on February 8, 2020 were negative. The infant likely acquired the virus from a household member, but it was difficult to ascertain the day of infection as there were no reported symptoms.	Breastmilk samples, collected from a breastfeeding mother with confirmed COVID-19 infection, tested negative several days after her diagnosis.	Kam K, Yung CF, Cui L, Pin RLT, Mak TM, Maiwald M, Li J, Chong CY, Nadua K, Tan NWH, Thoon KC. A Well Infant with Coronavirus Disease 2019 (COVID-19) with High Viral Load. Clinical Infectious Diseases. 28 Feb 2020. <a href="https://doi.org/10.1093/cid/ciaa201">https://doi.org/10.1093/cid/ciaa201</a>
Pregnancy, infant, premature birth	28-Feb-20	<a href="#">A case of 2019 Novel Coronavirus in a pregnant woman with preterm delivery</a>	Clinical Infectious Diseases	Brief Report	On February 2, 2020, a 28-year-old female, who was 30 weeks pregnant, presented to a fever clinic of Suzhou Municipal Hospital with intermittent fever for one week. Two throat swab samples were collected and tested negative. On February 6, the second SARS-CoV-2 RT-PCR results of her sputum came back positive. A preterm male infant was delivered at 30 weeks of pregnancy. On day 3 after cesarean section, RT-PCR analyses of the neonatal throat swab and stool samples were COVID-19 negative. He was kept in the isolation ICU of the neonatal nursery for observation, without any contact with his mother after birth. The newborn was given formula instead of breast milk ever since. Samples of breastmilk were not taken for testing.	A report from a hospital in China describes management of a newborn with confirmed COVID-19, who was isolated from his mother and fed formula, rather than breastmilk. Breastmilk samples for testing were notably missing.	Wang, X., Zhou, Z., Zhang, J., Zhu, F., Tang, Y., Shen, X., & Shen, X. (2020). A case of 2019 Novel Coronavirus in a pregnant woman with preterm delivery. Clinical Infectious Diseases, 28 February 2020, ciaa200, <a href="https://doi.org/10.1093/cid/ciaa200">https://doi.org/10.1093/cid/ciaa200</a>
Neonatal jaundice management, China	28-Feb-20	<a href="#">Management Strategies of Neonatal Jaundice During the Coronavirus Disease 2019 Outbreak</a>	World Journal of Pediatrics	Review	Owing to rigorous quarantine and control measures taken in China, routine neonatal health surveillance and follow-up have become challenging. Without follow-up surveillance, some rapid and progressive newborn diseases, such as bilirubin encephalopathy, may be ignored. The characteristics of onset age of kernicterus suggest that monitoring of bilirubin level at home provides a useful way to avert hospital visits and prevent the development of extreme hyperbilirubinemia. Therefore, we developed an online follow-up program for convenient monitoring of bilirubin level of newborns that is based on our practical experiences. The aim is to make our management strategies of neonatal jaundice tailored to the infection prevention and control during the COVID-19 epidemic.	Rigorous surveillance of COVID-19 leaves room for potential overlook of other rapidly progressive newborn diseases, like bilirubin encephalopathy. Programs for convenient monitoring of bilirubin level of newborns should be tailored to COVID-19 infection control.	Ma XL, Chen Z, Zhu JJ, et al. Management strategies of neonatal jaundice during the coronavirus disease 2019 outbreak [published online, 2020 Feb 28]. World J Pediatr. 2020. 00347-3. doi:10.1007/s12519-020-00347-3
Children, clinical characteristics, epidemiology, China, viral shedding	28-Feb-20	<a href="#">A Case Series of children with 2019 novel coronavirus infection: clinical and epidemiological features.</a>	Clinical Infectious Diseases	Brief Report	Authors first described the 2019 novel coronavirus infection in 10 children occurring in areas other than Wuhan. The coronavirus diseases in children are usually mild and epidemiological exposure is a key clue to recognize pediatric cases. Prolonged viral RNA shedding is observed in the respiratory tract during the convalescent phase in children, as well as in feces, which raises a question concerning whether the gastrointestinal tract may be another site of viral replication.	Milder clinical features, and prolonged viral RNA shedding in respiratory and stool specimens characterize COVID-19 in children with mild infection.	Cai J, Xu J, Lin D, et al. A Case Series of children with 2019 novel coronavirus infection: clinical and epidemiological features [published online, 2020 Feb 28]. Clin Infect Dis. 2020. doi:10.1093/cid/ciaa198

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Neonatal infection, newborn management, inter-hospital transfer	27-Feb-20	<a href="#">Emergency Plan for Inter-Hospital Transfer of Newborns With SARS-CoV-2 Infection</a>	Chinese Journal of Contemporary Pediatrics	Article in Mandarin; Abstract in English	This emergency transfer response plan for newborns with suspected or confirmed COVID-19 puts forward indications for organization management, protection strategies for medical staff, work procedures, and disinfection methods for transfer equipment.	Emergency response plans should be implemented to carry out inter-hospital transfer of neonates with COVID-19.	Chen Z, DU LZ, Fu JF, et al. Zhongguo Dang Dai Er Ke Za Zhi. 2020;22(3):226–230.
Children vs. adults, pathogenesis, immunology, respiratory tract, age-related difference	25-Feb-20	<a href="#">Are children less susceptible to COVID-19?</a>	Journal of Microbiology, Immunology, and Infection	Perspectives	This article explores underlying reasons that may explain differences in the pathogenesis of COVID-19 between children and adults. Children have fewer outdoor activities and undertake less international travel, making them less likely to contract the virus. Others have suggested that children have healthier respiratory tracts that have been exposed to less cigarette smoke and air pollution, as well as fewer underlying disorders. A difference in viral ACE2 receptors is frequently mentioned as a possible reason of age-related difference.	Fewer environmental exposures and a difference in viral binding receptors may explain the age-related difference in pathogenesis of COVID-19.	Lee PI, Hu YL, Chen PY, Huang YC, Hsueh PR. Are children less susceptible to COVID-19? [published online, 2020 Feb 25]. J Microbiol Immunol Infect. 2020. doi:10.1016/j.jmii.2020.02.011
Pregnancy, perinatal infection, breast milk sample, vertical transmission	25-Feb-20	<a href="#">Coronavirus Disease 2019 (COVID-19) During Pregnancy: A Case Series.</a>	Preprints	Case Series	This case series was conducted in the obstetric ward of Tongji Hospital. Systematic testing for SARS-CoV-2 infection included oropharyngeal swab, placenta tissue, vaginal mucus, and breast milk of mothers, as well as oropharyngeal swab, umbilical cord blood, and serum of newborns. All patients showed an uneventful perinatal course, successful outcomes, and no evidence of vertical transmission.	This case series presents the most comprehensive virological assessment of pregnant women and newborns to date. There was no evidence of vertical transmission.	Liu, W.; Wang, Q.; Zhang, Q.; Chen, L.; Chen, J.; Zhang, B.; Lu, Y.; Wang, S.; Xia, L.; Huang, L.; Wang, K.; Liang, L.; Zhang, Y.; Turtle, L.; Lissauer, D.; Lan, K.; Feng, L.; Yu, H.; Liu, Y.; Sun, Z. Coronavirus Disease 2019 (COVID-19) During Pregnancy: A Case Series. Preprints 2020, 2020020373
Pregnancy, obstetrics, coronaviruses, SARS-CoV antibodies in breastmilk	24-Feb-20	<a href="#">Coronavirus Disease 2019 (COVID-19) and Pregnancy: What Obstetricians Need to Know</a>	American Journal of Obstetrics & Gynecology	Expert Review	This expert review draws upon information on other pathogenic coronaviruses (SARS, MERS) to provide insight into effects of COVID-19 on pregnancy. A single report of SARS-CoV testing of breastmilk (approximately 130 days after illness onset) exists: no viral RNA was detected, but SARS-CoV antibodies were seen (Robertson et al, 2004). In another patient with SARS-CoV, at 7 weeks gestation, antibodies were not seen when breastmilk was tested at postpartum days 12 and 30 (Stockman et al, 2004). Until additional data are available, mothers who are well enough to express breastmilk should be encouraged to do so; breastfeeding can be instituted after she is no longer infectious.	In a 2004 report on SARS-CoV testing of breastmilk, antibodies were detected, but viral RNA was not. Expert authors recommend that breastfeeding should be initiated after a mother is no longer infectious.	Rasmussen SA, Smulian JC, Lednický JA, Wen TS, Jamieson DJ. Coronavirus Disease 2019 (COVID-19) and Pregnancy: What obstetricians need to know [published online, 2020 Feb 24]. Am J Obstet Gynecol. 2020. doi:10.1016/j.ajog.2020.02.017
Pediatrics, prevention, management, rapid advice guidelines	24-Feb-20	<a href="#">Protocol for the development of a rapid advice guideline for prevention, management and care of children with 2019 novel coronavirus infection.</a>	Annals of Palliative Medicine	Guideline	This guideline follows methods for developing WHO rapid advice guidelines to respond to public health emergencies, taking into account the special condition of COVID-19. The rapid review group will identify literature published since the 2003 SARS outbreak to formulate recommendation, participate in Delphi surveys, and reach consensus. So far, 2 rapid advice guidelines have been developed in China. To authors' knowledge, this is the first international rapid advice guideline on children with SARS-CoV-2.	Evidence-based guidance, in accordance with WHO requirements, first protocol for rapid advice guidelines for children with SARS-CoV-2.	Li W, Zhou Q, Tang Y, et al. Protocol for the development of a rapid advice guideline for prevention, management and care of children with 2019 novel coronavirus infection [published online, 2020 Feb 24]. Ann Palliat Med. doi:10.21037/apm.2020.02.33

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Pediatrics, epidemiology, China	24-Feb-20	<a href="#">Characteristics of and Important Lessons From the Coronavirus Disease 2019 (COVID-19) Outbreak in China</a>	JAMA	Viewpoint	In this summary report of 72,314 cases from the Chinese Center for Disease Control and Prevention, 1.2% of patients were aged 10 to 19 years, and even fewer (0.9%) were younger than 10 years. Only 1 death in this study was in the adolescent age range, and no children in the age range of 0-10 years died.	Based on data from China, rates of COVID-19 appear low in adolescents and lower in children. Deaths appear extremely rare.	Wu Z, McGoogan JM . Characteristics of and important lessons from the coronavirus disease 2019 (COVID-19) outbreak in China: summary of a report of 72314 cases from the Chinese Center for Disease Control and Prevention. JAMA. Published online February 24, 2020. doi:10.1001/jama.2020.2648
Infant infection, clinical characteristics, CT imaging	22-Feb-20	<a href="#">Clinical features and chest CT findings of coronavirus disease 2019 in infants and young children</a>	Chinese Journal of Contemporary Pediatrics	Article in Mandarin; Abstract in English	Retrospective analysis was performed for the clinical data and chest CT images of 9 children (0-3 years) who were diagnosed with COVID-19 by RT-PCR between January 20 and February 10, 2020. Family clustering was observed for all infected children, who presented only with respiratory symptoms. Laboratory examinations showed elevated lymphocyte count in 6 children and elevated leukocyte count in 2 children. CT examinations showed pulmonary inflammation in 8 children and lesions distributed along the bronchovascular bundles of 3 children.	Infants and young children tend to have mild clinical symptoms and imaging findings that are dissimilar from those of adults.	Zhou Y, Yang GD, Feng K, et al. Zhongguo Dang Dai Er Ke Za Zhi. 2020;22(3):215–220.
Children, epidemiology, crowdsourced data, news media, social media, China	20-Feb-20	<a href="#">Early Epidemiological Analysis of the Coronavirus Disease 2019 Outbreak Based on Crowdsourced Data: A Population-Level Observational Study</a>	The Lancet Digital Health	Original Article	This population-level, observational study compiles information from DXY.cn, a health-care-oriented social network that is currently streaming news reports on COVID-19 from local and national Chinese health agencies. A list of individual patients with COVID-19 and daily province-level case counts between January 13 and January 31, 2020, in China were collected, as well as a list of internationally exported cases of COVID-19 from global news media sources (Kyodo News, The Straits Times, and CNN), national governments, and health authorities. 507 patients with COVID-19 were identified, including 364 from mainland China and 143 from outside of China. 281 (55%) patients were male, and the median age was 46 years (IQR 35-60). Few patients (13 [3%]) were younger than 15 years and the age profile of Chinese patients adjusted for baseline demographics confirmed a lack of infections among children. Across the analyzed period, delays between symptom onset and seeking care at a hospital or clinic were longer in Hubei province than in other provinces in mainland China and globally. This sample captures only 507 (5.2%) of 9826 patients with COVID-19 reported by official sources during the analyzed period, but data align with an official report published by Chinese authorities on January 28, 2020.	Epidemiological trends of COVID-19 were assessed using crowdsourced data from news media and social media. Only 3% of 507 identified patients with COVID-19, in and outside of mainland China, were under 15 years old.	Sun K, Chen J, Viboud C. Early epidemiological analysis of the coronavirus disease 2019 outbreak based on crowdsourced data: a population-level observational study. Lancet Digit Health. 2020;2(4):e201–e208. doi:10.1016/S2589-7500(20)30026-1
Neonatal infection, twins, China	16-Feb-20	<a href="#">Twin girls infected with SARS-CoV-2</a>	Chinese Journal of Contemporary Pediatrics	Case Study in Mandarin; Abstract in English	This study reports twin girls who were diagnosed with SARS-CoV-2 infection in Hunan Province and admitted on Jan 29, 2020. Both recovered rapidly after symptomatic treatment. Clinical symptoms and imaging findings between the twin girls were diverse.	This case study suggests that children with SARS-CoV-2 infection may have mild clinical presentation with favorable prognosis.	Zhang GX, Zhang AM, Huang L, et al. Zhongguo Dang Dai Er Ke Za Zhi. 2020;22(3):221–225.

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Neonatal infection, gastrointestinal symptoms, clinical manifestation, China	16-Feb-20	<a href="#">SARS-CoV-2 infection with gastrointestinal symptoms as first manifestation in a neonate</a>	Chinese Journal of Contemporary Pediatrics	Case Study in Mandarin; Abstract in English	A neonate with SARS-CoV-2 infection presented with initial symptoms of vomiting and milk refusal. After two weeks of treatment at Wuhan Children's Hospital, the patient gradually recovered and was discharged.	Neonates may present with primarily gastrointestinal symptoms (such as milk refusal and vomiting), rather than respiratory symptoms.	Wang J, Wang D, Chen GC, Tao XW, Zeng LK. Zhongguo Dang Dai Er Ke Za Zhi. 2020;22(3):211–214.
Child, family cluster, person-to-person transmission, genomic sequencing, phylogenetic analysis, China	15-Feb-20	<a href="#">A Familial Cluster of Pneumonia Associated With the 2019 Novel Coronavirus Indicating Person-To-Person Transmission: A Study of a Family Cluster</a>	The Lancet	Original Article	This study reports five patients in a family cluster who presented with unexplained pneumonia and travelled to Wuhan from Shenzhen between December 29, 2019 and January 4, 2020, and an additional family member who did not travel to Wuhan. Five family members (36-66 years) presented with fever, upper or lower respiratory tract symptoms, or diarrhea, or a combination of these 3-6 days after exposure. On admission, they and one asymptomatic child (10 years) had radiological ground-glass lung opacities. Older patients (>60 years) had more systemic symptoms, extensive lung changes, lymphopenia, thrombo-cytopenia, and increased C-reactive protein and lactate dehydrogenase levels. The nasopharyngeal or throat swabs of these six patients were negative for known respiratory microbes by point-of-care multiplex RT-PCR, but five patients (four adults and the child) were RT-PCR positive for genes encoding the internal RNA-dependent RNA polymerase and surface Spike protein of this novel coronavirus, which were confirmed by Sanger sequencing. Phylogenetic analysis of these five patients' RT-PCR amplicons and two full genomes by next-generation sequencing showed that this is a novel coronavirus, which is closest to the bat SARS-related coronaviruses found in Chinese horseshoe bats.	This study reports a family cluster of 2019-nCoV infection, at the University of Hong Kong-Shenzhen Hospital, including infection of a 10-year-old child via person-to-person transmission. Analysis of RT-PCR amplicons and genomes of patients in this study found similarity between this novel coronavirus and those found in Chinese horseshoe bats.	Chan JF, Yuan S, Kok KH, et al. A familial cluster of pneumonia associated with the 2019 novel coronavirus indicating person-to-person transmission: a study of a family cluster. Lancet. 2020. doi:10.1016/S0140-6736(20)30154-9
Infant, family cluster, China	14-Feb-20	<a href="#">Novel Coronavirus Infection in Hospitalized Infants Under 1 Year of Age in China</a>	JAMA	Research Letter	This retrospective study identified all hospitalized infants diagnosed with COVID-19 between December 8 and February 6, 2020 in China, using summaries released daily by the central government. Nine infected infants were identified; all had at least one infected family member, with the infant's infection occurring after the family member's infection. None of the infants required intensive care or mechanical ventilation.	All infected children belonged to familial clusters, so aggregative onset is an important feature in pediatric cases. Infants can't wear masks, so they require specific protective measures.	Wei M, Yuan J, Liu Y, Fu T, Yu X, Zhang Z. Novel Coronavirus Infection in Hospitalized Infants Under 1 Year of Age in China. JAMA. Published online February 14, 2020. doi:10.1001/jama.2020.2131
Pregnancy, vertical transmission, breastmilk sample, China	12-Feb-20	<a href="#">Clinical characteristics and intrauterine vertical transmission potential of COVID-19 infection in nine pregnant women: a retrospective review of medical records.</a>	The Lancet	Original Article	This article presents a retrospective review of laboratory results and CT scans from nine pregnant women with COVID-19 pneumonia admitted to Zhongnan Hospital of Wuhan University from Jan 20 to Jan 31, 2020. All women tested positive for SARS-CoV-2 by use of quantitative RT-PCR (qRT-PCR) on samples from the respiratory tract. The nine pregnant women were in their third trimester, and all underwent caesarean section. Six samples of amniotic fluid, cord blood, neonatal throat swab, and breastmilk collected after their first lactation tested negative for the presence of SARS-CoV-2, using both the CDC-recommended test kit and the in-house tested RT-PCR assays.	No evidence for intrauterine infection caused by vertical transmission in women who develop COVID-19 pneumonia in late pregnancy. Six breastmilk samples tested negative for viral nucleic acid.	Chen, H., Guo, J., Wang, C., Luo, F., Yu, X., Zhang, W., ... & Liao, J. Clinical characteristics and intrauterine vertical transmission potential of COVID-19 infection in nine pregnant women: a retrospective review of medical records. Lancet. 2020 Feb 12, 395(10226), 809-815. [e-pub]. https://doi.org/10.1016/S0140-6736(20)30360-3

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Neonatal infection, breastmilk sample, China	11-Feb-20	<a href="#">2019-novel coronavirus infection in a three-month-old baby</a>	Chinese Journal of Pediatrics	Case Study in Mandarin; Abstract in English	An infant was breastfed after birth, with normal growth and good health status. The infant was admitted to a hospital in Xiaogan, Hubei Province, on January 26, 2020 and continued to be breastfed. She tested positive for COVID-19 one day later. Nasopharyngeal swab specimens collected from the parents on January 26 initially tested negative, but the parents were diagnosed with infection one week later. In this case, viral nucleic acid was detected in the stool of the mother, but no viral nucleic acid was detected in breastmilk or urine.	This case study raises the question of shorter incubation periods in neonates compared to adults. Notably, breastmilk samples tested negative for viral nucleic acid.	Zhang, Y. H., Lin, D. J., Xiao, M. F., Wang, J. C., Wei, Y., Lei, Z. X., ... & Xiang, W. (2020). 2019-novel coronavirus infection in a three-month-old baby. Chinese journal of pediatrics, 2020 Feb 11;58(0):E006. DOI: 10.3760/cma.j.issn.0578-1310.2020.0006.
Maternal and neonatal outcomes, coronaviruses, SARS, MERS	10-Feb-20	<a href="#">Potential Maternal and Infant Outcomes from Coronavirus 2019-nCoV (SARS-CoV-2) Infecting Pregnant Women: Lessons from SARS, MERS, and Other Human Coronavirus Infections</a>	Viruses	Perspective	This communication provides a comprehensive overview of published data on the epidemiological and clinical effects of SARS, MERS, and other coronavirus infections on pregnant women and their infants. Experiences with SARS and MERS indicate the capability of coronaviruses to cause life-threatening maternal disease among other adverse outcomes for both mother and fetus. The likelihood of vertical transmission, however, is low.	Based on data related to SARS and MERS infections, the likelihood of vertical transmission of 2019-nCoV is low.	Schwartz DA, Graham AL. Potential Maternal and Infant Outcomes from (Wuhan) Coronavirus 2019-nCoV Infecting Pregnant Women: Lessons from SARS, MERS, and Other Human Coronavirus Infections. Viruses. 2020;12(2):194. Published 2020 Feb 10. doi:10.3390/v12020194
Pregnancy, neonatal infection, neonatal death, Pediatric Critical Illness Score	10-Feb-20	<a href="#">Clinical analysis of 10 neonates born to mothers with 2019-nCoV pneumonia</a>	Translational Pediatrics	Original Article	This article presents a retrospective analysis of 10 neonates (including 2 twins) born to nine mothers with confirmed 2019-nCoV infection in five Chinese hospitals from January 20 to February 5, 2020. Of the neonates, six had a Pediatric Critical Illness Score of less than 90. The first symptom in most neonates was shortness of breath. Up to now, 5 neonates have been discharged, 1 has died, and 4 neonates remain in hospital in stable condition. Pharyngeal swab specimens collected 1 to 9 days after birth for RT-PCR tests all showed negative results.	Perinatal COVID-19 infection may have adverse effects on newborns, such as fetal distress, premature labor, thrombo-cytopenia, and abnormal liver function.	Zhu H, Wang L, Fang C, et al. Clinical analysis of 10 neonates born to mothers with 2019-nCoV pneumonia. Transl Pediatr. 2020;9(1):51-60. doi: 10.21037/tp.2020.02.06.
Children, pediatric management, prevention, expert consensus	7-Feb-20	<a href="#">Diagnosis, treatment, and prevention of 2019 novel coronavirus infection in children: experts' consensus statement.</a>	World Journal of Pediatrics	Review	Of 9692 total confirmed cases of 2019-nCoV, as of January 30, 2020, a total of 28 children aged from 1 month to 17 years have been reported in China. For standardizing prevention and management of 2019-nCoV infections in children, authors organized an expert committee to formulate this experts' consensus statement. This statement is based on the Novel Coronavirus Infection Pneumonia Diagnosis and Treatment Standards (the fourth edition) (National Health Committee) and other previous diagnosis and treatment strategies for pediatric virus infections.	This consensus statement summarizes current strategies on diagnosis, treatment, and prevention of 2019-nCoV infection in children.	Shen K, Yang Y, Wang T, et al. Diagnosis, treatment, and prevention of 2019 novel coronavirus infection in children: experts' consensus statement [published online, 2020 Feb 7]. World J Pediatr. 2020. doi:10.1007/s12519-020-00343-7

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Perinatal and neonatal management, prevention, China	6-Feb-20	<a href="#">Chinese expert consensus on the perinatal and neonatal management for the prevention and control of the 2019 novel coronavirus infection (First edition).</a>	Annals of Translational Medicine	Expert Consensus	The possibility of the vertical transmission of 2019-nCoV cannot be ruled out. Infants should not be fed with breast milk from mothers with confirmed or suspected of 2019-nCoV. If the suspected or diagnosed mother and her breast milk test negative for 2019-nCoV, infants should be fed with breast milk. Donor milk can be considered for use after being screened for 2019-nCoV, because the virus may be excreted into the milk during the incubation period.	Chinese expert consensus recommends that infants should not be fed with breast milk from mothers with confirmed or suspected 2019-nCoV. Donor milk can be considered after screening for 2019-nCoV.	Wang L, Shi Y, Xiao T et al.; on behalf of the Working Committee on Perinatal and Neonatal Management for the Prevention and Control of the 2019 Novel Coronavirus Infection. Chinese expert consensus on the perinatal and neonatal management for the prevention and control of the 2019 novel coronavirus infection (First edition). Ann Transl Med 2020;8(3):47. doi: 10.21037/atm.2020.02.20
Children, pediatric diagnosis, treatment, clinical characteristics	5-Feb-20	<a href="#">Diagnosis and treatment of 2019 novel coronavirus infection in children: a pressing issue</a>	World Journal of Pediatrics	Editorial	Children have special respiratory tract structure characteristics, immature immune systems (relatively low levels of humoral and cellular immunity, as well as Interferon secretion), and susceptibility to respiratory virus infections. With further wide use of pathogen tests, the number of pediatric patients is expected to increase. Based on 28 pediatric cases reported by the National Health Commission of China by Jan 30, 2020, the age of onset ranged from 1 month to 17 years. All were family clusters or with close contact history. Most had mild symptoms, without fever or pneumonia, and good prognosis, recovering within 1-2 weeks after disease onset. No pediatric deaths have been reported, in contrast with the SARS and MERS epidemics. Previous population studies have shown that IFN-alpha atomization can effectively reduce the infection rate of RSV, influenza virus, adenovirus, and SARS-CoV.	This article represents one of the first publications to characterize the clinical features of COVID-19 in the pediatric population.	Shen, K., Yang, Y. Diagnosis and treatment of 2019 novel coronavirus infection in children: a pressing issue. World J Pediatr 2020. <a href="https://doi.org/10.1007/s12519-020-00344-6">https://doi.org/10.1007/s12519-020-00344-6</a>
Children, viral pneumonia, pediatric management, prevention, China	4-Feb-20	<a href="#">Management plan for prevention and control of novel coronavirus pneumonia among children in Xiangya Hospital of Central South University.</a>	Chinese Journal of Contemporary Pediatrics	Article in Mandarin; Abstract in English	Under the organization of the Xiangya Hospital of Central South University, the Department of Pediatrics has formulated an action plan with Xiangya unique model to prevent and control novel coronavirus pneumonia (NCP) among children according to the current epidemic situation and diagnostic and therapeutic program in China. For perinatal newborns, breastfeeding is not recommended for infants born to women who are suspected or confirmed with NCP, but the women should express milk regularly to ensure lactation. Breastfeeding is not feasible until infected mothers are cured.	Clinicians at Xiangya Hospital in China do not recommend breastfeeding for infants born to women with suspected or confirmed COVID-19 pneumonia. Women should express milk regularly to ensure lactation.	Peng, J., Wang, X., Yang, M. H., Wang, M. J., & Zheng, X. R. Management plan for prevention and control of novel coronavirus pneumonia among children in Xiangya Hospital of Central South University. Zhongguo dang dai er ke za zhi, 22(2), 100-105. 2020 Feb. DOI: 10.7499/j.issn.1008-8830.2020.02.004
Newborn management, emergency response plan, NICU, China	2-Feb-20	<a href="#">Emergency response plan for the neonatal intensive care unit during epidemic of 2019 novel coronavirus.</a>	Chinese Journal of Contemporary Pediatrics	Article in Mandarin; Abstract in English	For each infant admitted to the hospital, health workers ask his/her mother, family members, caregivers, and people who have been in contact: 1) whether they are 2019-nCoV confirmed or suspected cases; 2) whether they visited an epidemic areas in the past 2 weeks, especially Wuhan, Hubei Province; 3) whether they have been in close contact with patients with respiratory infections in the past 2 weeks; 4) whether they have been in close contact with wild animals in the past 2 weeks. If any of the above conditions are met, the infant will be placed in a single room and observed for 14 days. During the observation period, in order to reduce risk, breastfeeding by mothers confirmed with COVID-19 is not recommended.	This Pediatric Committee's emergency response plan advises against breastfeeding for newborns who are under observation for 14 days, following screening for exposure.	Pediatric Committee. Emergency response plan for the neonatal intensive care unit during epidemic of 2019 novel coronavirus. Chinese journal of contemporary pediatrics, 22(2), 91. 2020 Feb. DOI: 10.7499/j.issn.1008-8830.2020.02.002

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Perinatal and neonatal management, prevention, China	1-Feb-20	<a href="#">Perinatal and neonatal management plan for prevention and control of 2019 novel coronavirus infection (1st Edition).</a>	Chinese Journal of Contemporary Pediatrics	Article in Mandarin; Abstract in English	Pregnant women with COVID-19 in critical condition should be isolated from infants for 14 days after delivery. After the mother is cured, breastfeeding can be initiated. High-risk infants, including those who have been in close contact with confirmed family members and caregivers, or have been exposed to sources of infection in public places, are not recommended to breastfeed. If they are fed with donor milk, the milk should be pasteurized.	This editorial from a working group for the prevention and control of neonatal 2019-nCoV in China states that breastfeeding should be avoided for infants born to mothers with confirmed COVID-19 infection, until after the mother is cured.	Working Group for the Prevention and Control of Neonatal 2019-nCoV Infection in the Perinatal Period of the Editorial. Perinatal and neonatal management plan for prevention and control of 2019 novel coronavirus infection (1st Edition). Chinese Journal of Contemporary Pediatrics, 2020, 22(2): 87-90. DOI: 10.7499/j.issn.1008-8830.2020.02.001
Primary healthcare settings, prevention guidance, rural China	1-Feb-20	<a href="#">Guidance on the Control and Prevention of SARS-CoV-2 Infection in Primary Healthcare Settings in Rural China (First Edition).</a>	Chinese General Practice	Article in Mandarin; Abstract in English	Mothers who are isolated at home, following evaluation by medical staff at a primary health institution, can continue breastfeeding, but they must wear medical masks properly and practice hand hygiene using soap and water or hand disinfectants containing alcohol.	These guidelines pertain to breastfeeding mothers during home isolation.	ZHANG D Y, YAO M, WANG J, et al. Guidance on the Control and Prevention of SARS-CoV-2 Infection in Primary Healthcare Settings in Rural China (First Edition). Chinese General Practice, 2020, 23(7): 763-769. DOI: 10.12114/j.issn.1007-9572.2020.00.246