Raising a Newborn When Your Office Is an ER

Dr. Rajiv Bahl talks about having a newborn at home when working on the COVID-19 front lines.

Dr. Rajiv Bahl and his wife, Lauren Bahl, work in healthcare. They welcomed their son, Sanjay, in April. Image via Rajiv Bahl

All data and statistics are based on publicly available data at the time of publication. Some information may be out of date. Visit our coronavirus hub and follow our live updates page for the most recent information on the COVID-19 pandemic.

When my wife, Lauren, and I found out that she was pregnant with our first child in August 2019, we didn't think we'd be fighting a pandemic when he was born.

Lauren and I met in Michigan just before I started my emergency medicine residency and her master's degree in physician assistant studies. In 2018, we married and started our careers in Florida, with her in the intensive care unit (ICU) and me in the emergency room (ER).

We always wanted a family early in our married life, and in August 2019 we found out we were expecting our first child.

Like so many parents-to-be, we were elated and ready to experience 2020 to its fullest.

And then COVID-19 hit.

Early days of the outbreak

In January, the Centers for Disease Control and Prevention (CDC) announced its first travel-related case of COVID-19.

Florida wasn't as hard-hit in the early stages of the virus, so Lauren was still working in the ICU, and I was taking care of patients in the emergency department.

As the virus spread, we realized that this pregnancy wouldn't be like others, especially as immediate frontline workers.

We wore the appropriate personal protective equipment (PPE) and took all the necessary precautions, but as cases started to rise in Florida, we started to become wary of a COVID-19 surge we knew would come.

In March, we decided Lauren should take her maternity leave early.

But even after she started to stay home, we lived with the looming anxiety of this virus hanging over us.

We grappled with a host of questions related to the outbreak.

What would happen if I were to get an infection and not know it? What was to come if Lauren were to get an infection from me?

How does one cope with that kind of guilt?

Experts without answers

Even as people working in the healthcare field, there were no easy answers.

We did our own research, read all the available studies, and spoke with Lauren's obstetrician, but there just wasn't enough data yet. This virus was just too new at that time.

All we could do was take extra precautions to ensure our own safety from this virus as the pregnancy progressed and as we prepared for the birth.

And getting ready to give birth in the middle of a pandemic is a pretty surreal experience.

When we arrived at the hospital for delivery, the initial questionnaire asked if we had ever been in contact with someone with COVID-19.

That answer was a resounding yes.

This wasn't the most comforting answer for our physicians and nurses, but it's the nature of our working lives.

Fortunately, we were treated the same as the others: with extreme caution. No visitors were allowed, health checks at entryways, and our interactions with healthcare providers were limited and distant in nature.

We did this together. And while we had envisioned it with more friends and family to celebrate, we became stronger and wiser for it.

With all the precautionary measures, on April 26 our son, Sanjay, was born happy and healthy.

Life with a newborn in a pandemic

When Lauren's maternity leave ended in July, she returned to the ICU. Sanjay was just 2 months old.

Earlier in the outbreak, we held out hope that the virus wouldn't be widespread in July.

Instead, Florida broke records for cases and hospitalizations that month.

For the sake of our family's health, we're extremely careful about PPE. I wear a fresh pair of scrubs, a clean surgical cap, goggles to protect my eyes, either a N95 or a P100 respirator, and a gown to protect my clothing.

The previous habit of talking and embracing each other after a long day of work is a relic of the past. We've had to retrain ourselves on a new evening routine to prevent the spread of this virus.

And after a long shift of being gowned and masked at work, we have to take time to reflect on our day as we drive home.

It's not just a way to deal with the mental toll of working through a pandemic, but a way to verify we weren't exposed to the virus.

We try to remember every patient interaction to make sure that there were no instances where there may have been a break in our PPE.

When we come home, our shoes stay in the garage. The first order of business is showering and scrubbing with antimicrobial soap.

Although data shows that children with this virus have mild to moderate symptoms many times, infants are at the greatest risk.

Although our son was born with no medical conditions, he's still considered immunocompromised because of his small airways and young age.

We've decided as a family that if one of us were to become ill or questionably infected, we'd stay isolated from each other and from Sanjay.

A routine to stop the virus

The stress of living and working through a pandemic can creep in slowly.

The daily routine of wearing full PPE, scrubbing multiple times a day after work, and reviewing all patient interactions for signs of infection has added extra pressure on our family.

If we get a sore throat, we wonder whether it's from yelling through our mask or the early signs of COVID-19. We worry about getting people sick if we are asymptomatic carriers.

At the hospital, patients and their families look to us for our expertise and help, but when we go home, we're just like everyone else. We try to do our best for our son, ourselves, and our patients.

We have many of the same struggles and questions about raising a newborn that so many new parents face, even those who work in medicine.

We feel fortunate to be a part of the front line and take care of the people who need it the most.

But the stress of wanting to protect our own family is still there.

We can only take the steps to help our patients, safeguard ourselves, and hope people wear masks and physically distance.

It not only keeps you healthy, it keeps your healthcare workers and their families healthy as well.

Dr. Rajiv Bahl, MBA, MS, is an emergency medicine physician, board member of the Florida College of Emergency Physicians, and health writer. You can find him at his website and on Instagram.