

ANTENATAL TESTING GUIDELINES and FLOWSHEET

INDICATION	START	NST ¹	AFI/MVP	Doppler ²	BPP ³	Ripen / Deliv
Preeclampsia (mild)	at diagnosis	2x/wk	1x/wk	-	-	> 37 wks
CHTN – controlled no meds	36 wks	-	-	-	-	39 -39 6/7 wks
CHTN – controlled on meds	36 wks	1x/wk	1x/wk	-	-	39 -39 6/7 wks
CHTN – difficult control	32 wks	2x/wk	1x/wk	-	-	> 37 wks
Gest HTN	36 wks	1x/wk	1x/wk	-	-	37-38 wks
IUGR ⁷	at diagnosis	2x/wk	1x/wk	1x/wk	1x/wk	38-39 wks
Post Dates	41 wks	2x/wk	1x/wk	-	-	41-42 wks
Suboptimally dated	39 wks	2x/wk	1x/wk	-	-	41-42 wks
BMI > 40 kg/m ²	no testing needed			-	-	41-42 wks
GDMA1 diet only	no testing needed					40-41 wks
DM/GDMA2 / adequate control ⁸	32 wks	2x/wk	1x/wk	-	-	39 -39 6/7 wks
DM/GDMA2 / inadequate cont. ⁸	32 wks	2x/wk	1x/wk	-	-	> 38 wks
Discordant Twins	at diagnosis	2x/wk	MVP ⁴	if IUGR→1x/wk	if IUGR→1x/wk	37-38 wks
MC/DA Twins	prn	2x/wk	MVP	-	-	37-38 wks
DC/DA Twins	prn	1x/wk	MVP	-	-	38-39 wks
H/O IUFD	32 wks	1x/wk	1x/wk	-	-	39 -39 6/7 wks
Oligo ^{5,7}	at diagnosis	1x/wk	repeat 24 hrs	-	-	36-37 6/7
Polyhydramnios ^{6,7}	at diagnosis	1x/wk	1x/wk	-	-	as indicated
Cholestasis, TBA $\geq 10 < 40$	32 wks	1x/wk	1x/wk	-	1x/wk	39 -39 6/7 wks
Cholestasis, TBA $\geq 40 < 100$	32 wks	1x/wk	1x/wk	-	1x/wk	37-38 wks
Cholestasis, TBA ≥ 100	32 wks	1x/wk	1x/wk	-	1x/wk	36-37 wks
HIV+	36 wks	1x/wk	1x/wk	-	-	> 38 wks
Gastrochisis	32 wks	2x/wk	1x/wk	(if IUGR)	1x/wk	36-37 wks

Other (hyperthyroid, Down syndrome, etc.): individualize

NB: Our Dept. default is not to perform cervical ripening or cesarean delivery prior to 39 wks EGA without medical / obstetric criteria like those noted above. Please see our other Dept. guidelines for other indicated deliveries prior to 39 weeks.

¹ False negative rate of NST = 2.4/1000

² Dopplers only of proven benefit in IUGR

³ False negative rate of BPP = 0.4/1000

⁴ MVP = maximum vertical pocket of AF (should be >2 cm)

⁵ Oligohydramnios (no vertical pocket >2cm)

⁶ Moderate and severe polyhydramnios (any vertical pocket >12 cm, or AFI ≥ 30)

⁷ Refer to MFM if <32 wks or have any questions

⁸ If adequate control (adherent and >50% in range for GDM with normal FBS(s), or >90% for Pre-existing DM, then kick counts 32-36 weeks