

MFM/OB/NICU Consensus Management in the Periviable Period

< 22 0/7 Weeks	22 0/7- 22 6/7 Weeks	23 0/7- 23 6/7 Weeks	24 0/7- 24 6/7 Weeks
<p>Corticosteroids at 21 5/7 if parents want neonatal intervention at 22 wks.</p> <p>If Previale PPROM and parents request full neonatal care at 22 wks, start antibiotics to prolong latency period.</p> <p>No Fetal monitoring or C/S for fetal indications.</p> <p>No neonatal or maternal intervention expect for maternal indications.</p> <p>NICU team will NOT attend delivery unless dates or EFW are uncertain and at parents request.</p>	<p>NICU Consult</p> <p>NICU team at delivery</p> <p>No fetal monitoring or C/S for fetal indications.</p> <p>If parents request full care:</p> <ul style="list-style-type: none"> - Steroids ASAP - Magnesium - Tocolysis (+/-) - GBS prophylaxis <p>If Previale PPROM and parents request full neonatal care at 22 wks, start antibiotics to prolong latency period.</p> <p>If the patient requests full care, repeat NICU consult in one week if undelivered.</p>	<p>NICU Consult</p> <p>NICU team at delivery</p> <p>No fetal monitoring or C/S for fetal indications.</p> <p>If parents request full care:</p> <ul style="list-style-type: none"> - Steroids ASAP - Magnesium - Tocolysis (+/-) - GBS prophylaxis <p>If Previale PPROM and parents request full neonatal care, start antibiotics to prolong latency period.</p> <p>If the patient requests full care, repeat NICU consult in one week if undelivered.</p>	<p>NICU Consult</p> <p>NICU team at delivery, We recommend full resuscitation</p> <p>If parents request full care:</p> <ul style="list-style-type: none"> - Steroids ASAP - Magnesium - Tocolysis (+/-) - GBS prophylaxis <p>If the patient requests full care, repeat NICU consult in one week if undelivered.</p> <p>If PPROM, start antibiotics to prolong latency period.</p> <p>Patient may decide, after counselling, if she desires:</p> <ul style="list-style-type: none"> - Fetal HR monitoring - C/s for fetal distress.

1. Estimated fetal weight can be used as an additional data point in those patients with uncertain dating
 2. Reliable dating takes precedence over estimated fetal weight
 3. An urgent periviable NICU consult can be requested for GA 21 5/7- 23 6/7. OB and NICU teams will discuss clinical findings and meet with family together.
- For patients 25 0/7 wk + (in absences of major congenital defects or life limiting circumstances), default should always be prenatal optimization and full resuscitation.

Medical Legal Disclaimer:

Welcome to the UC Davis Health, Department of Pediatrics, Clinical Practice Guidelines Website. All health and health-related information contained within the Site is intended chiefly for use as a resource by the Department's clinical staff and trainees in the course and scope of their approved functions/activities (although it may be accessible by others via the internet). This Site is not intended to be used as a substitute for the exercise of independent professional judgment. These clinical pathways are intended to be a guide for practitioners and may need to be adapted for each specific patient based on the practitioner's professional judgment, consideration of any unique circumstances, the needs of each patient and their family, and/or the availability of various resources at the health care institution where the patient is located. Efforts are made to ensure that the material within this Site is accurate and timely but is provided without warranty for quality or accuracy. The Regents of the University of California; University of California, Davis; University of California, Davis, Health nor any other contributing author is responsible for any errors or omissions in any information provided or the results obtained from the use of such information. Some pages within this Site, for the convenience of users, are linked to or may refer to websites not managed by UC Davis Health. UC Davis Health does not control or take responsibility for the content of these websites, and the views and opinions of the documents in this Site do not imply endorsement or credibility of the service, information or product offered through the linked sites by UC Davis Health. UC Davis Health provides limited personal permission to use the Site. This Site is limited in that you may not:

- Use, download or print material from this site for commercial use such as selling, creating course packets, or posting information on another website.
- Change or delete propriety notices from material downloaded or printed from it. · Post or transmit any unlawful, threatening, libelous, defamatory, obscene, scandalous, inflammatory, pornographic, or profane material, any propriety information belonging to others or any material that could be deemed as or encourage criminal activity, give rise to civil liability, or otherwise violate the law.
- Use the Site in a manner contrary to any applicable law.

You should assume that everything you see or read on this Site is copyrighted by University of California or others unless otherwise noted. You may download information from this Site as long as it is not used for commercial purposes, and you retain the proprietary notices. You may not use, modify, make multiple copies, or distribute or transmit the contents of this Site for public or commercial purposes without the express consent of UC Davis Health.