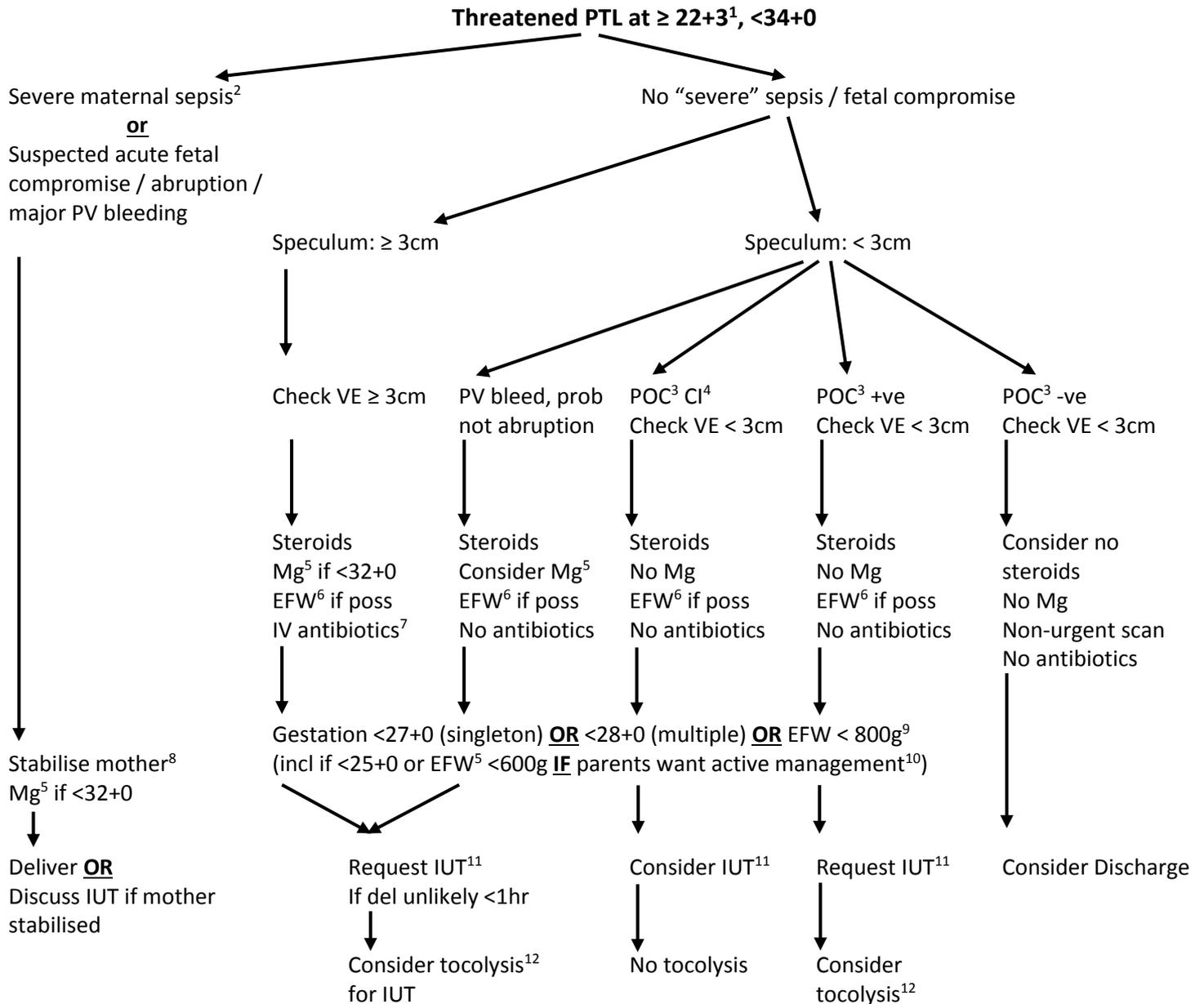


Oxford AHSN Regional Maternity Guideline

Algorithm for Management of Threatened Extreme Preterm Labour and IUT (updated Jan2020)



Footnotes:

Dates according to CRL excl in IVF pregnancies. Note this gestation has been modified following new BAPM Guidelines. Active resuscitation for neonates $<23+0$ will be offered if there are good prognostic (eg $>+22+3$, had steroids, delivery in Level 3). If there is uncertainty about the circumstances or the dates, call obstetric consultant at OUH.

Women potentially suitable for emergency cerclage (i.e. >16 weeks, no sepsis and with painless cervical opening) should be discussed with Level 3 FMU consultant.

1. Sepsis meeting criteria for local severe sepsis bundle
2. POC: Point of care test (e.g. fibronectin or equivalent) to assess likelihood of preterm delivery more accurately than history and examination
3. CI: contraindicated/ not recommended. Consider fFN usage if postcoital as false negatives unlikely
4. Mg: Magnesium bolus 4g (16mmol) Magnesium Sulphate as 20mls of 20% magnesium sulphate IV over 5 – 10 minutes if $<32+0$ weeks. Note PReCePT suggests 30 but clinical benefit up to 32 weeks.
5. EFW: estimated fetal weight $\pm 15\%$ if possible
6. IV antibiotics. Follow unit antibiotic guideline; avoid co-amoxiclav. Prophylactic antibiotics only to be used in labour.
7. Stabilisation of acutely unwell mother beyond scope of this document
8. Criteria for delivery in Level 3 Neonatal Unit. If criteria not met, manage as per local preterm labour guideline
9. If time, offer discussion with paediatrician. Document any discussion regarding IUT with parents. Consider providing Thames Valley Neonatal Network patient information leaflets if available.
10. For IUT: try OUH first. 8-5pm call Delivery Suite (01865 221988/7), and specifically request to speak to the consultant obstetrician on Delivery Suite. From 5pm to 8am, hospital switchboard (01865 741166), with the request to speak to the obstetric consultant on call. DO NOT call neonatal unit or delivery ward manager first.
11. Tocolysis. Follow unit tocolysis guideline. Do not use nifedipine if magnesium has been given or is to be given