

Ultrasound Guide

For COVID-19 Response

1st Trimester

ALL PATIENTS

To confirm viability, establish gestational dates, and identify additional risk factors (e.g. – multiple gestation, obvious abnormalities, adnexal or uterine abnormality, etc.)

Mid 2nd Trimester
(20-22 weeks)

Mid 2nd Trimester: To evaluate fetal anatomy and confirm normal interval growths.

As directed by
MFM

AS INDICATED

- Multiple gestation
- Pre-existing diabetes (Type 1 & 2)
- Fetal anomalies
- Fetal growth restriction, especially if less than 5th%

At the time of
diagnosis

*If not already done in past 3 weeks

- Preeclampsia
- Gestational HTN
- Starting BP medication in patient with known chronic HTN that was previously not treated.
- Amniotic fluid abnormality identified elsewhere, such as Antenatal Testing or outside ANMC

32 Weeks
+/- 36 Weeks

- Maternal age of 40 or greater
- Gestational diabetes
- Substance use, including marijuana, tobacco, ETOH
- Chronic HTN, not on medication
- Uterine fibroid greater than 5 cm
- Prior pregnancy complicated by fetal growth restriction or SGA
- Obesity
- Hyperthyroidism requiring treatment