Ultrasound Guide
For COVID-19 Response

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

1st Trimester

Mid 2nd Trimester (20-22 weeks)
Mid 2nd Trimester: To evaluate fetal anatomy and confirm normal interval growths.

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

*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

As directed by MFM

At the time of diagnosis

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