

OB Limited / Follow-up:

- Prep: None
- Basic Principles: Use appropriate transducer for patient body habitus. Patient position to vary depending on fetal anatomy to be documented. Obtain appropriate history and LMP if known.
- Examination should include the following:
 - Fetal number and position
 - Fetal viability, heart rate and/or rhythm
 - If it has been more than 4 weeks since we have seen the patient include measurements for growth (BPD, HC, AC and FL). At least two separate measurements of each.
 - With all obtained measurement also document:
 - Estimated gestational age and compare with LMP and prior ultrasounds if available.
 - Cephalic Index
 - HC/AC ratio
 - Estimated fetal weight
 - Percentile of growth after 24 weeks for both LMP and prior ultrasound
 - Amniotic Fluid Index. Calipers for the AFI should not include any part of the umbilical cord in the measurement.
 - Placental location, grade and cord insertion site.
 - Document 4 chamber heart, outflow tracts, stomach, kidneys and bladder.
 - Recheck any areas not seen previously, seen as not normal on prior or specifically requested by ordering physician.