3rd day of evaluation
• Spina bifida consult
• Social Work consult
• Neonatology consult
• Anesthesia consult
• Pediatric surgery consult T&S and MRSA nasal swab
• MFM Wrap up consult

Proceed with fetal intervention for spina bifida between 24–25 6/7 weeks’ gestation

Patient case presented at weekly Fetal Center multidisciplinary conference

Patient counseled on option for fetal intervention

Fetal criteria for fetal repair of spina bifida
• Gestational age < 25 weeks’ gestation
• Myelomeningocele bony defect between T1-S1
• Normal chromosomes
• No other major congenital anomalies present
• No presence of kyphosis (≤ 30 degrees)

Maternal criteria for fetal repair of spina bifida
• No previous hysterotomy or classical uterine c-section
• No history of preterm delivery or incompetent cervix
• Cervical length ≥ 20 mm
• No platelet alloimmunization
• No infection with HIV or hepatitis
• No maternal uterine malformations
• Good psychosocial support
• Willing to accept blood products

Expanded criteria under IRB approval:
• Prenatal maternal BMI < 40 mg/kg²
• Pre-gestational diabetes in good control with normal Hgb A1C
• Red cell alloimmunization to antibodies rarely associated with HDFN
• Chronic hypertension in good control on medications
• Minor congenital anomalies (Ex: small VSD)

This flow chart was developed as a flexible educational tool to promote consistency in the general care of patients. It is not intended to substitute for or be used as professional medical advice for any individual and is not intended to set out a standard of care for any specific disease or condition. The treatment of patients requires the exercise of professional medical judgment in order to meet individual requirements. If you have questions regarding your or anyone else’s health, medical care, or the diagnosis or treatment of a specific disease or condition, please consult with your personal healthcare provider.

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