Referral to The Fetal Center

Diagnosis of possible fetal skeletal dysplasia on outside ultrasound

Initial Consult at The Fetal Center:
- Ultrasound
- Genetic Counseling (counsel patient on amniocentesis for CMA and karyotype)
- Fetal ECHO

Presentation of patient’s case at The Fetal Center’s weekly multidisciplinary conference for management and delivery recommendations

Second Consult at The Fetal Center:
- Consider fetal low dose CT*
- Pediatric clinical genetic consultation

Presumptive diagnosis (outcome unknown)

Presumptive diagnosis (non-lethal)

Consider plain X-ray films at 32 weeks gestation if no confirmed diagnosis and no prior low dose CT

Labor and Delivery Tour

Consider transfer of OB care to tertiary care facility, initial visit @ 28 weeks EGA. Complete transfer of care @ 36 weeks EGA

Delivery @ 38-40 weeks gestation

Delivery and transfer of Neonate to the NICU for further management

Presumptive diagnosis (lethal)

Consider palliative care

Neonatology Consult & NICU tour

Presentation of patient’s case at 34 weeks gestation to finalize delivery plan

* Total X-ray dose not to exceed 2.5-4.5 mSu

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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