Evaluate umbilical artery Doppler

**Twin Pregnancy**
- Small twin < 10th percentile
- Discordance > 25th percentile EFWlarger- EFWsmaller/ EFWlarger

Positive diastolic flow

- **Type I**
- Ultrasound Q 2 weeks (alternate limited/growth)
- UA & DV Doppler

At 30 weeks’ gestation begin weekly BPP w/Dopplers

Delivery by 34-35 weeks’ gestation

Persistent AREDF

- **Type II**
- Weekly fetal monitoring with DV Doppler

Consider 2X/weekly monitoring or hospitalization for intensive fetal monitoring at 28 weeks’ gestation

Consider steroids and MgSO4 at 27-28 weeks’ gestation in anticipation of delivery by 30-32 weeks

< 22 weeks gestation with discordance > 35%, oligohydramnios, and DV Doppler PI > 95%

Counsel regarding selective reduction

- **Type III**
- Weekly fetal monitoring with DV Doppler

Betamethasone and MgSO4 at 32-34 weeks with anticipation of delivery at 32-34 weeks

Intermittent AREDF

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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