Open Spina Bifida Fetal Surgery: Post-Operative Pathway (Outpatient)

Discharge Home

Weekly FMU US and review
- US for liquor volume, Dopplers, cervical length
- Review for symptoms of leaking fluid or abdominal pain

4 weekly FMU US
- Full Growth scan, liquor volume, Dopplers, full neuro US
- One further fetal MRI during pregnancy, ideally 30-36/40 weeks gestation

If any concerning signs or symptoms discuss with UCLH fetal surgery team by:
- Calling 020 3447 6150 in hours (FMU)
- Email: spinabifida-fetalsurgery@nhs.net
- Calling 020 3456 7890 out of hours and asking for on call obstetrics consultant who will put you in touch
- Ask patient to pass on personal contact details given to her

SROM/ oligohydramnios/ membrane separation/ cervical shortening
Arrange admission and discuss with UCLH fetal surgery team

Confirmed preterm labour or fetal distress
Deliver by emergency CS due to increased risk of uterine rupture with previous hysterotomy

Planned delivery
- By 37/40 weeks
- Fetal steroids as per national protocols
- At CS inspect hysterotomy scar and excise if deficient
- Planned regional fetal medicine unit delivery (with onsite NICU and existing pathway for antenatal paediatric neurosurgical review of babies born with neural tube defects).

Version 1.4 16th December 2019