

EFW $\leq 10^{\text{th}}$, AC $> 10^{\text{th}}$

EFW	UAD	NST	BPP	f/u US	Delivery timing
3 rd -10 th	normal	Weekly	weekly	UAD 2 weeks Growth 4 weeks	38-39 wks
3 rd -10 th	elevated	Twice weekly	weekly	UAD/BPP weekly Growth 3 weeks	37 wks
<3 rd	normal	Twice weekly	weekly	UAD 2 weeks Growth 4 weeks	37 wks
<3 rd	elevated	Twice weekly	weekly	UAD/BPP weekly Growth 2-3 weeks	37 wks

AC <10th, UAD normal

EFW	NST	BPP	f/u US	Delivery timing
>20th	no	no	Growth 3 weeks	39 wks
11-20th	Weekly at 32 week or more	no	UAD 2 weeks Growth 4 weeks	39 wks
3rd-10th	weekly	weekly	UAD 2 weeks Growth 4 weeks	38-39 wks
<3rd	Twice weekly	weekly	UAD/BPP weekly Growth 2-3 weeks	37 wks

AC <10th, UAD >95th %ile for EGA

EFW	NST	BPP	f/u US	Delivery timing
>20th	weekly	Prn NR NST	Weekly UAD Growth 3 wks	37 wks
11-20th	weekly	Prn NR NST	Weekly UAD Growth 3 wks	37 wks
3rd-10th	Twice weekly	weekly	Weekly UAD Growth 3 wks	37 wks
<3rd	Twice weekly	weekly	UAD weekly Growth 2 weeks	37 wks

***May increase surveillance for coincident comorbidities or risk factors

AC <10th, Special considerations

EFW	UAD	NST	BPP	f/u US	Delivery timing
ANY	ABSENT	2-3x/week	weekly	2-3x/week UAD Growth 2 wks	33-34 wks Likely C/S
ANY	REVERSE	1-2x/day In hospital	daily	Growth 2 wks	30-32 wks Likely C/S
ANY	ANY	1-2x/day In hospital	q 24-72 hours MVP <2 cm	UAD weekly Growth 2 weeks	At dx if 34wks or more

Reference

- Society for Maternal-Fetal Medicine (SMFM) Consult Series #52: Diagnosis and Management of Fetal Growth Restriction: Juliana Gevaerd Martins, MD; Joseph R. Biggio MD, MS; and Alfred Abuhamad, MD published May 2020