

INTRAUTERINE FETAL DEMISE (IUFD)

DEFINITION: Fetal death after 20 weeks gestational age.

- Before 20 weeks, pregnancy loss is referred to as a miscarriage or spontaneous abortion.
- Parent groups prefer the term "stillborn" for IUFD .

EVALUATION (cause may or may not be determined):

- After diagnosis, if patient is afebrile, has no abdominal pain, and labs are normal, may allow 24 hours before starting induction. May need to use laminaria before other cervical ripening agents.
- Parents can make decisions about delivery
- Grieving process is individualized, be supportive

MATERNAL LABS

(choices should be guided by clinical, sonographic and histopathologic findings):

Glucose	Rubella titer	urine toxicology screen *
T4, TSH	CMV titer	blood type & antibody screen *
Hep B	CMV culture	ABO & Rh status (positive or negative) *
PT, PTT	Herpes titer	CBC *
RPR	Herpes culture	Toxoplasma
FANA	Chlamydia	Kleihauer – Bethke *
	Listeria culture	

Lupus anticoagulant, anticardiolipin antibody titers, fibrinogen, LFT's if clinical suspicion of underlying disorder

* recommended for all women w/IUFD

PLACENTA:

- Weight
- Pathology exam
- Culture between chorionic and amniotic membrane

FETAL EVALUATIONS (usually done by HCMC pathologist):

Weight

Chromosomes - excise 1 cm from fetal side of placenta, iliotibial IT band .5cm x 1cm strip, or umbilical cord section (if twins, avoid cross contamination, separate instruments)

Full body x- ray (if indicated)

Labs:

Fetal hgb	RPR
Aerobic cx	CMV titer
Anaerobic cx	Hep profile
Herpes titer	virology cx of skin vesicles
Rubella titer	genetics

Autopsy:

Discretion of parents

Encourage

Check with coroner re: who pays

SUPPORT SERVICES:

Allow parents time with fetus, parents may want a photo and a lock of hair

Be available to answer questions, be honest

Offer chaplaincy, for support and may want the baby baptized

Get interpreter if any question of understanding

Follow IUFD protocol in L&D

Contact FMC Social Worker, may want some follow up counseling

Pregnancy Loss Support Groups

www.perinatalhospice.org

Books : Waiting with Gabriel by Amy Kuebelbeck, MA

Empty Cradle, Broken Heart: Surviving the Death of Your Baby by Deborah L. Davis, Ph D

INFORMATION FOR PARENTS:

- What are you looking for if you take a tissue sample from the fetus?
Evidence of chromosomal abnormalities, which may have caused the miscarriage/IUFD.
- Timing of sample:
Chromosome analysis requires tissue growth in a culture.
Cultures must be set up within 48 hours of fetal demise.
If tissue is viable it will take about 6 weeks before a result is available.
- The family can contact the OBTU to set up an appointment to discuss results.

- How will results be helpful?
50% of all early miscarriages have chromosomal abnormalities.
Decisions re: future pregnancies can be based on this information.
- Estimated costs:
\$125.00 if test is unsuccessful, \$450.00 if test is successful.
If insurance will not pay for this procedure, a payment plan is available.
Contact Patient Billing at 873-3073 after bill is received.

REFERENCES:

Up to Date

Perinatal Hospice: Support for Mothers, Babies and Families: A talk given by Amy Kuebelbeck, MA who experienced a pregnancy with a son who was diagnosed prenatally with a condition that was not compatible with life