



11.15 PERINATOLOGY REFERRAL GUIDELINES

Contracted Group: Desert Perinatal Associates

Telephone Number	Addresses
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	600 South Rancho Drive Suite 190 Las Vegas, Nevada 89106

The specialists will keep the referring OB/GYN fully informed of their patients' progress with notes, letters, and phone consultations as needed. All recommendations of treatment will be coordinated with the OB/GYN, so their continuing care of the patient will progress as smoothly and effectively as possible. The OB/GYN is encouraged to call the consultant about any questions they have regarding the recommendations of the specialist for their patient.

Suggested Guidelines are general suggestions only and may be modified based on physician judgment in individual cases.

Prior to referring to Perinatology, an OBGYN should, at the very least:

- Verify that the pregnancy is viable (BY ULTRASOUND—NOT URINE/BLOOD HCG)
- Determine gestational age (BY ULTRASOUND)

Typically, referral to a MFM specialist falls within the following groups:

1. Medical problems such as:

- a. Pre-existing diabetes
- b. Gestational diabetes diagnosed before 36 weeks. (Please include labs).
- c. Hypertension with or without pre-eclampsia.
- d. Autoimmune diseases (Please include labs and records)
- e. History of maternal cardiac or neurologic disease (Please include all labs and records.)
- f. Genetic issues.
- g. Grave's Disease.
- h. Other maternal diseases (Please include all records)

2. Obstetrical problems such as:

- a. Abnormal screening for aneuploidy (Include labs please)
- b. Multiple pregnancy
- c. History of term stillbirth (Include records please)
- d. Suspected intrauterine fetal growth restriction (referral after an ultrasound for growth has been performed—please include ultrasound report).

- e. Polyhydramnios or oligohydramnios.
- f. Advanced maternal age.

3. Fetal complications such as:

- a. Fetal congenital heart defect
- b. Fetal brain or spine defect
- c. Possible skeletal dysplasia
- d. Other possible fetal congenital anomalies