

OB<14 Weeks		
Reviewed:	Date: 1/4/2022	
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OB<14 Weeks

PURPOSE

Practice parameter for the performance of obstetrical less than 14 weeks (first trimester) diagnostic ultrasound exam.

SUPPORTIVE DATA

- Obtain a written, verbal, or electronic order from provider
- Verify that written orders are scanned into Epic
- Previous relevant imaging procedures

INDICATIONS

Indication for first trimester ultrasound examination include but are not limited to:

- Confirmation of the presence of an intrauterine pregnancy
- Evaluation of a suspected ectopic pregnancy
- Defining the cause of vaginal bleeding
- Evaluation of pelvic pain
- Estimation of gestational age
- Diagnosis or evaluation of multiple gestations
- Confirmation of cardiac activity
- Assessing for certain fetal anomalies, such as an encephaly, in high risk patients
- Evaluation of maternal pelvic masses and/or uterine abnormalities
- Evaluation of suspected hydatidiform mole

Limited exam may be performed to evaluate interval growth, evaluate cervix and assess the presence of cardiac activity.

CONTRAINDICATIONS

• There are no absolute contraindications.

EQUIPMENT LIST

• Real-time ultrasound scanner with transducer of appropriate frequency

- Gel
- Towels
- Patient gown (if applicable)

SAFETY

- Universal precautions for bodily fluids should be observed as per hospital protocol.
- All ultrasound carts are annually checked and are up to date with all state and manufacturer guidelines.
- Exams will be prioritized according to ordering status (STAT, ASAP or Routine)

PATIENT PREPARATION

- Drink 12-20 ounces of clear, non-carbonated liquid 45 minutes prior to exam to achieve a full bladder
- Do not use bathroom until instructed

PROCEDURE

- 1. Check provider's orders for reason for exam and any comments.
- 2. Review report of patient's most recent ultrasound, relevant imaging or relevant labs if applicable.
- 3. Start exam in Epic
- 4. Verify patient by 2 patient identifiers (name, DOB, wristband).
- 5. Process should be explained to patient.
- 6. Have patient change into gown if appropriate
- 7. Perform imaging procedure
- 8. End exam in Epic

IMAGING PROCEDURE

A normal First Trimester OB protocol will aim to include the following views:

- 1. SAG ML Uterus
- 2. Cervix w/ Internal OS
- 3. TRANS ML Uterus
- 4. SAG Placenta if visualized
- 5. TRANS Placenta if visualized
- 6. MGSD in three dimensions
- 7. SAG CRL 3 separate images
- 8. Yolk sac w/ measurement-only if no fetal pole
- 9. Document amnion if possible

- 10. Image OB worksheet with MGSD then delete MGSD measurements
- 11. Image OB worksheet with CRL only for true EDC
- 12. SAG RT Ovary
- 13. SAG RT Ovary w/ Measurement
- 14. TRANS RT Ovary
- 15. TRANS RT Ovary w/ Measurement
- 16. SAG LT Ovary
- 17. SAG LT Ovary w/ Measurement
- 18. TRANS LT Ovary
- 19. TRANS LT Ovary w/ Measurement
- 20. Document pathological findings with all appropriate additional views to include color doppler and/or pulsed wave doppler

Additional endovaginal scanning may be warranted to better visualize fetus and maternal ovaries.

DOCUMENTATION

- 1. Written, verbal, or electronic order from provider
- 2. The worksheet and images need to be scanned into PACS under appropriate exam and put online.
- 3. Ultrasound images should be labeled with anatomy imaged and orientation (SAG or TRANS)
- 4. All images are submitted with above documentation for dictation and stored in PACS
- 5. For all STAT, ER and Urgent Care ultrasound exams, call radiologist for prelimanary report to give to ordering provider
- 6. If it is between 2200 0700, submit exam along with proper documentation to teleradiology

REFERENCE

- Approved by Pharmacy and Therapeutics Board on 08/14/2020
- Approved by Medical Executive Team on 09/11/2020
- Approved by Medical Director, Dr. Muneer Desai, on 08/20/2020
- Approved by Radiology Protocol Committee on 3/9/2020
- ACR Practice Parameters Resolution 27 (2018)

References

Reference Type Title Notes