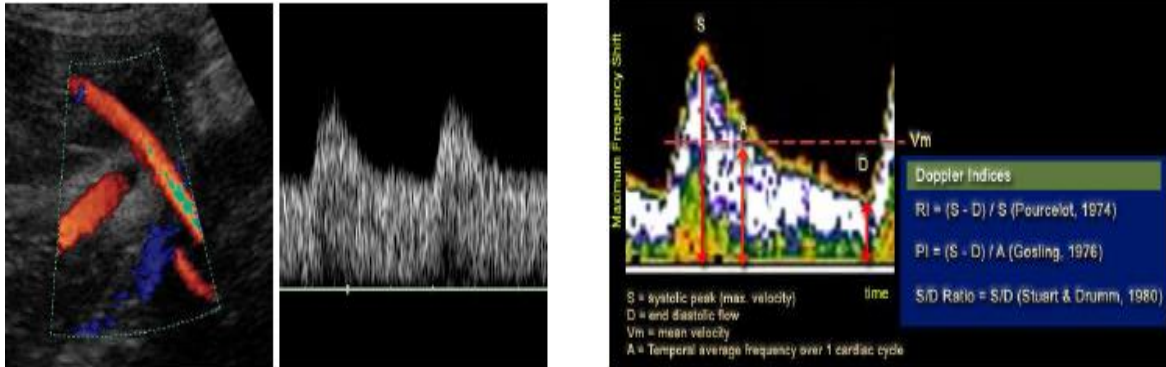


Routine Uterine Doppler at 18-20 week scan



- All women will have their bilateral uterine Doppler's measured trans-abdominally at their anomaly (18-20 week) scan.
- If the scan is delayed this can be performed until 22 weeks.
- Uterine PI of both sides will be measured.
- The software calculates the mean PI. There is **no need to mention notches present or absent**. The high PI is predictive on its own and superior to the variability introduced by using notches.
- If the **Mean PI is above 1.60** then **book them for growth scans at 28-32 and 36 weeks**. This is the 95th centile and will cover the gestational period from 18th to the 22nd week.
- **Do not use the astraia graphs as they are old and newer data has supplanted them.**
- The women will be seen by the consultant team (in the preeclampsia high blood pressure clinic) and offered low dose aspirin 75mg/day(if not contraindicated) in view of raised risk of preeclampsia, gestational hypertension and/or growth restriction. This screening advise can be given by the midwives in the clinic.
- The Astraia software will have the **following statements to be used for high and low mean pi.**
- "The uterine blood flow measurements have shown a normal mean PI. No further action is recommended."
- The uterine blood flow measurements have shown a high Mean Pi which in some pregnancies can be indicative of a risk of raised blood pressure (preeclampsia or gestational hypertension) or small baby (growth restriction) in later pregnancy. We will arrange for growth scans at 28, 32 and 36 weeks of pregnancy. In addition you will be seen in the growth/hypertension clinic to consider starting low dose aspirin 75mg/day (if not contraindicated) to be taken once a day until 36 weeks of pregnancy, to reduce these risks."