Continued from Fetal CDH Algorithm 1

Growth US every 4 weeks
Weekly BPP/NSTs @ 32 wks

If indicated: Transfer of care to MFM/OB at tertiary care facility by 28 wks and before 34 wks GA

32-34 wks GA

Repeat fetal ECHO, if indicated
Repeat US/MRI
Pediatric surgery follow up consult

Multidisciplinary perinatal planning

Determine plan for delivery

IOL ≥ 39 wks (with ECMO standby)
EXIT to ECMO

Protocol guided neonatal management by dedicated multidisciplinary team

Neonatology consult
facility tours

Revised 9/2015. These algorithms have been developed for the purpose of unifying the general care of patients. They are not intended to serve as a rigid protocol or a written proxy for the standard of care. They are not intended to impose standards of care preventing selective variances from the guidelines to meet the specific and unique requirements of individual patients. These algorithms do not preclude the use of the physician’s clinical judgment in a specific situation. The algorithms remain the intellectual property of Texas Children’s Hospital. They cannot be reproduced in whole or in part without the expressed permission of Texas Children’s Hospital.