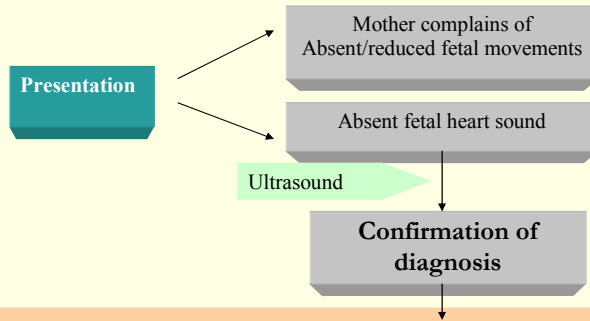


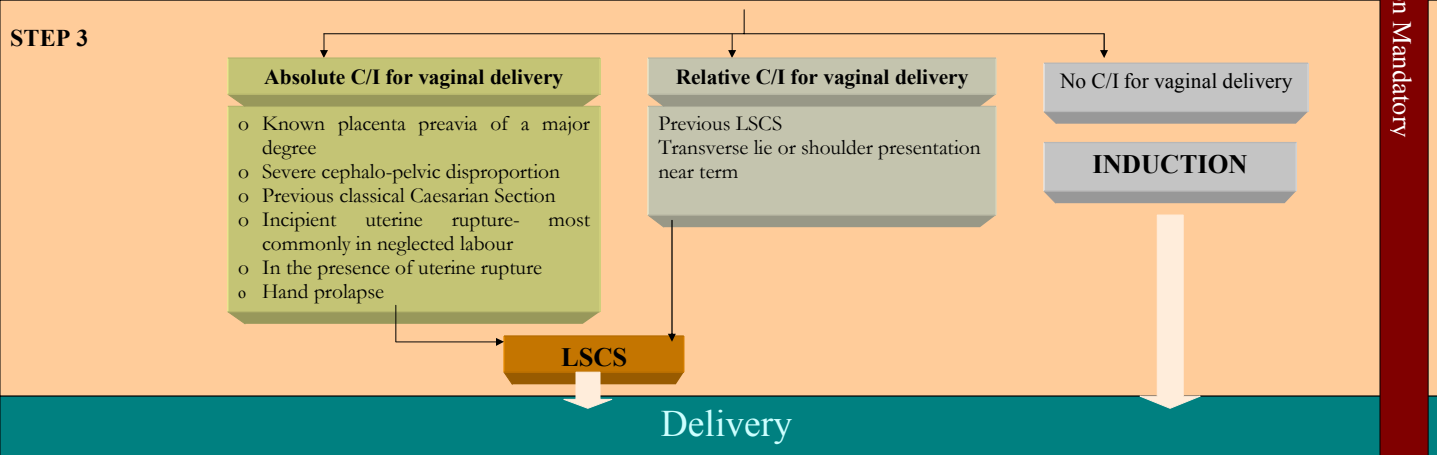
Management of Intrauterine Death



STEP 1 **Breaking the bad news**
Maintain dialogue with family members
Offer counseling support

STEP 2

<p>Basic investigations</p> <ul style="list-style-type: none"> o Urine full report o Urine culture and anti-bacterial sensitivity test (ABST) o Full blood count o Random blood sugar levels o High vaginal swab and end ocervical canal swab for culture and anti-bacterial sensitivity test (ABST) o Coagulation screen <ul style="list-style-type: none"> o Bleeding time o Clotting time o Serum fibrinogen levels o Serum fibrinogen degradation products o Prothrombin time o Activated partial thromboplastin time o Ultrasound scan- <ul style="list-style-type: none"> o Fetal presentation and lie o Placental localization o Detection of placental abruption and the volume of the haematoma o To detect uterine pathology (Detection of fibroids and their location, to detect uterine abnormalities, to detect any other pelvic/abdominal pathology) 	<p>Special investigations</p> <ul style="list-style-type: none"> o Diabetes mellitus detection- <ul style="list-style-type: none"> o Fasting blood sugar o Post-prandial blood sugar o Glucose tolerance test o Haemoglobin A1c levels o Fructoseamine o Syphilis screening <ul style="list-style-type: none"> o Venereal disease research laboratory test (VDRL) o Treponima pallidum haemagglutination test (TPHA) o Thyroid function test <ul style="list-style-type: none"> o Thyroid stimulating hormone (TSH) o Free thyroxine levels (FT4, FT3) o Urine toxicology screening o Blood culture and anti-bacterial sensitivity test (ABST) (in cases of maternal pyrexia or presence of signs of septicaemia) 	<p>Additional tests</p> <ul style="list-style-type: none"> o Antibody screening o Kleihauer-Betake test o Lupus anticoagulant and anticardiolipin antibody testing. o Thrombophilia panel: o Testing for (1) cytomegalovirus (acute and chronic titers),(2) Rubella virus (acute and chronic titers, if not immune), (3)Parvovirus(acute and chronic titers) and, (4) Toxoplasmosis gondii(acute and chronic titers).
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STEP 4

- o Careful inspection of the fetus and placenta.
- o Placental cultures for suspected listeria infection (To obtain placental cultures, separate the amnion and the chorion and submit a culture specimen using Stuart medium.)
- o Radiographs, if indicated
- o Autopsy if indicated
- o MRI, if no autopsy
- o Chromosomal analysis of the fetus and placenta.
- o Counseling of parents and relations
 - Explanation of probable or definite causes or events that led to the death in utero
 - Arranging mementoes if parents wish (Photographs of fetus etc.)
 - Therapy with tranquilizers, hypnotics
 - Psychological support by medical and ward staff.
 - Referral to a Psychologists/Psychiatrists when indicated.
- o Suppression of lactation – Firm breast support
 - Mild analgesics for breast tenderness and pain.
 - Bromocriptine therapy.
- Contraception as appropriate