Management of Fetal Growth Restriction
Definition: EFW < 10\textsuperscript{th} percentile and/or AC < 10\textsuperscript{th} percentile

BPP, UA Doppler, and offer amniocentesis if <32 weeks and/or polyhydramnios, structural defect. Add CMV if for amniocentesis. \textit{(If referred from outside provider for FGR, perform Doppler regardless of EFW/AC percentile).}

- **Normal testing (Doppler, BPP)**
  - Repeat Doppler in 1-2 weeks, initiate ANFS as appropriate. If in ANFS, weekly UA Doppler.
  - Repeat growth in 3-4 weeks.
  - Delivery at 37 weeks if EFW < 3\textsuperscript{rd} percentile, 38-39 weeks if isolated FGR 3\textsuperscript{rd}-10\textsuperscript{th} percentile.

- **Elevated UA PI or oligohydramnios**
  - Doppler work up to include MCA Doppler for CPR at time of growth ultrasounds.
  - Weekly UA Doppler. Initiate ANFS as appropriate.
  - Repeat growth in 2 weeks.
  - If oligohydramnios, delivery at 34-37 weeks. If isolated FGR with elevated UA PI, delivery at 37 weeks.

- **UA AEDF/REDF**
  - Check DV Doppler.
  - Hospital admission. Repeat Doppler in 24 hours (2-3x/week). Fetal monitoring. Non-reassuring fetal testing may necessitate delivery.
  - Repeat growth in 2 weeks.
  - Repeat growth in 2 weeks.
  - AEDF: delivery at 33-34 weeks. REDF: delivery at 30-32 weeks.