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To: West Midlands

- Regional Ultrasound Group
- Superintendent Radiographers
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- Heads of Midwifery
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Dear Colleague

Re: DATING OF PREGNANCY

This letter follows on from recent discussions of the Regional Ultrasound Group, which resulted in the recommendation that **pregnancies should be dated on the basis of a first or second trimester ultrasound scan**. I was asked to circulate a summary of the evidence which would assist in the implementation of this consensus throughout the region.

The key points to this recommendation are as follows:

1. There is now ample evidence from ultrasound studies in pregnancies achieved with assisted reproduction techniques (i.e. where the exact length of pregnancy at the time of the scan is known) that the commonly used ultrasound dating formulae are accurate.
2. There is *no* evidence for calculating the dates of pregnancy on the basis of one of the common algorithms, using menstrual dates unless they are discordant with scan dates by more than 7, 10 or 14 days, in which case only scan dates are used. There is good epidemiological evidence that ultrasound dates alone better predict the expected date of delivery than 'certain' menstrual dates, alone or in combination with scan dates.
3. Dating error is important overall, but especially at the extremes of pregnancy. In early pregnancy assessment, misdating by even a few days can result in significant error when assessing and counselling on fetal viability. At the other extreme, many apparently prolonged pregnancies are not really post-term if ultrasound dates are applied. A policy of scan dating is likely to result in a reduction of pregnancies considered in need of labour induction. (This issue was also reviewed in the Perinatal Institute's Forum on Inductions in September 2000, and is summarised on http://www.wmpi.net/reviews/iol/iol_dating.htm)
4. It is important to emphasise to mothers that a preference of scan dates over menstrual dates does not mean that their recall of the first day of the last menstrual period is being questioned. The unknown variable is the date of conception, which is often *not* after a 14 day follicular phase, as assumed by Naegele's dating rule. It is also important to establish the correct dates in early pregnancy, and not to re-calculate them in response to subsequent events.

I enclose a commentary in the British Journal of Obstetrics and Gynaecology which sets out the arguments in more detail and lists references to the published evidence.

With best regards,

Jason Gardosi

Enc.