



SASUOG

South African Society for Ultrasound in Obstetrics and Gynaecology

PRACTICE GUIDELINE - LEVELS OF SCANNING

A. The basic obstetric scan.

This scanning level includes:

- reliably determining the number of fetuses
- reliably obtaining measurements of standard fetal planes – these measurements include BPD, HC, AC, CRL and FL
- reliably and correctly calculating the gestational age, based on various fetal biometry data
- reliably detecting or ruling out an abnormal position of the placenta (low lying or praevia in relation to the internal os), with criteria that are appropriately gestational-age dependent
- reliably assessing liquor volume qualitatively and detecting oligo- as well as polyhydramnios
- reliably detecting significant congenital anomalies and/or chromosomal markers, as they are generally visible on the recommended standard biometry planes
- reliably identifying maternal pelvic pathology (uterus & adnexa)

This scanning level is suitable for:

- Pregnancies at low risk of fetal anomaly where parents do not wish to have the fetal development assessed
- Clinical situations where a specific question needs to be addressed and a detailed fetal survey is not readily available (e.g. dating, bleeding, suspected twins or breech, postdates etc.)

Compulsory disclosure to parents, when scanning at this level:

- This level of scanning does in no way assess fetal normality, neither in shape or function
- This scan does not assess the risk for aneuploidy
- This scan is not the recommended standard as a fetal anatomic survey is regarded as the standard of care, even for low risk pregnancies

B. The fetal anatomy survey

Assessment of the fetal anatomy as a screening procedure in pregnancies at low risk of fetal anomaly.

This scanning level includes, in addition to the content of the basic obstetric scan:

- Normal appearance of the standard biometry sections (BPD, AC, FL)
- Normal appearance of the transcerebellar and transventricular plane, including normal transcerebellar diameter and atrium width
- Normal appearance of the facial profile
- Presence of 2 normal sized eyes, integrity of the alveolar ridge
- Normal appearance of the lungs
- Normal appearance of the 4-chamber view of the heart
- Normal appearance of the 3-vessel view
- Presence of the filled stomach in the left hemi-abdomen
- Closed abdominal wall at the cord insertion
- Normal appearance of the two kidneys
- Presence of the filled bladder
- Presence of 12 long bones, two hands and two feet
- Absence of signs of spina bifida (recommendation: request maternal serum-AFP to improve detection)
- Confirmation of twin chorionicity
- Confirmation of 3 umbilical cord vessels

Compulsory disclosure to parents, when scanning at this level:

- This scan is not suitable for fetuses at high risk of fetal anomaly as a more specialised assessment is regarded the standard of care
- This scan does not assess the risk for Down syndrome
- Serum AFP is recommended to improve the detection rate of open spina bifida
- Any deviation of normal on any of the standard planes will require referral to a specialist

C. Specialised assessment of the fetal anatomy and wellbeing in pregnancies at high risk of fetal pathology, including when prior screening results (ultrasound or otherwise) suggest an abnormality.

This scanning level includes, in addition to the content of the fetal anatomic survey, many additional planes of face, CNS and heart etc. as well as in depth functional assessment and accurate aneuploidy screening.