

1st February 2026 Addendum

Following discussion with the Maternity and Neonatal Strategic Network there has been clarification regarding the management of DFM from 37 weeks gestation.

For women who present between 37 and 38+6, a full antenatal assessment should be undertaken and a CTG. If indicated, an ultrasound should be requested as for earlier gestations. In the presence of other problems such as SGA or hypertension, and following discussion with a consultant, then a cervical assessment membrane sweep and/or IOL can be discussed with the woman. Discussion should include the lack of evidence showing reduced mortality and increased medical intervention as well as risk of TTN and NICU admission compared to conservative management. IOL for DFM alone is NOT recommended.

Women who present 39+0 or beyond with DFM should also have a full antenatal assessment and CTG. IOL from this gestation has been associated with reduced perinatal mortality without increasing operative birth, and so the option of cervical assessment, membrane sweep and/or IOL should be discussed and offered.