



Obstetric Services Guidelines for Dating Criteria

1. The purpose of this document is to summarize recommended guidelines for estimating gestational age and the anticipated due date.

2. Listed below are the guidelines for re-dating based on ultrasonography:

<u>Gestational age Range</u>	<u>Method of Measurement</u>	<u>Discrepancy supporting re-dating</u>
≤ 8 6/7 weeks	CRL	> 5 days
9 0/7 – 13 6/7 weeks	CRL	> 7 days
14 0/7 – 15 6/7 weeks	BPD, HC, AC, FL	> 7 days
16 0/7 – 21 6/7 weeks	BPD, HC, AC, FL	> 10 days
22 0/7 – 27 6/7 weeks	BPD, HC, AC, FL	> 14 days
28 0/7 and beyond	BPD, HC, AC, FL	> 21 days

3. In general, ultrasound measurements in the first trimester are the most accurate method of establishing or confirming the patient's gestational age. The crown-rump length (CRL) measurements can be performed transabdominally or transvaginally and obtained in a midline sagittal plane. Ideally, the measurement should fill most of the width of the ultrasound screen, and the mean of 3 CRL measurements will be used for dating. If the mean CRL measures greater than 84 mm, the second trimester biometric parameters (BPD, HC, AC, FL) should be used for dating.
4. The criteria for re-dating the pregnancy are listed in the table above. The LMP is the reference point in determining whether the dates should be changed. For example, if the ultrasound dating (AUA) at 9 weeks and 4 days differs by more than 7 days from the LMP, the EDD should be changed to correspond with the ultrasound dating.
5. If the pregnancy resulted from in-vitro fertilization (IVF) and the conception/fertilization date is known with certainty, as with IVF and other assisted reproductive technology (ART), the EDD should be calculated based on this date.

These recommendations are consistent with those developed by the American College of Obstetricians and Gynecologists, The American Institute of Ultrasound in Medicine, The International Society of Ultrasound in Obstetrics and Gynecology, and The Society for Maternal-Fetal Medicine.

Reference

Method for Estimating Due Date. Committee Opinion No. 611. American College of Obstetricians and Gynecologists. Obstet Gynecol 2014;124:863–6 (Reaffirmed 2016).



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