PRELABOUR PRETERM RUPTURE OF MEMBRANES (PPROM)

Confirm diagnosis (ROM without contractions):
Do a speculum examination with visual confirmation of fluid draining from the os, or pH testing of vaginal fluid or, if necessary, liquor volume assessment on ultrasound.
Digital vaginal examination must be avoided.
(If contractons are present, manage as for Preterm Labour)

Gestational age <24 weeks (or EFW <500g if unsure dates)
Discuss late TOP vs expectant management
If patient chooses TOP- complete notification forms
Induce labour with oxytocin 10-20 units in 1L 0.9% saline at 120 mL/hr

Gestational age ≥ 34 weeks (or estimated fetal weight ≥ 2 kg)
Look for underlying causes of PPROM
Allow labour to proceed
If the mother is not in labour within 12-16 hours, start antibiotics (see dose below) and do induction of labour with oxytocin or with oral misoprostol

Gestational age 24w0d-25w6d sure gestation:
Exclude risk factors
Discuss with consultant
Consider expectant management
Steroids only at 26w5d

Gestational age 26w0d-33w6d (or 700g-1999g if unsre gestation)
Give Betamethasone (BMZ), IM, 12 mg, 2 doses 24 hours apart (from 26w5d only)
If BMZ is not available: Dexamethasone, IM, 8 mg, 3 doses 8 hours apart

Give antibiotics:
Ampicillin, IV, 1 g six hourly for 48 hours. Follow with:
Amoxicillin, oral, 500 mg eight hourly for a further 5 days.
AND
Azithromycin 1g orally as a single dose.

If severe penicillin allergy: Clindamycin, IV, 600 mg 8 hourly for 48 hours. Follow with: Clindamycin, oral, 450 mg 8 hourly for a further 5 days.
AND
Azithromycin 1g orally as a single dose.

Give tocolysis if contractions start in the first 24 hours after admission
Observe temperature, maternal heart rate, fetal heart rate, and pad checks six hourly
Do abdominal examination for tenderness; and CTG daily
Induce labour at 34 weeks (or EFW of 2 kg if unsure), or if there are any signs of chorioamnionitis
During labour, give ampicillin 2 g IV, followed by 1 g IV six hourly until birth (to prevent beta haemolytic streptococcal infection)

If labour starts anytime 24 hours after 1st dose of BMZ, do no suppress but allow labour to continue