

336 Fetal Growth Restriction-FGR (PG)

**Description**

- Diagnosed by provider (fetal weight < 10<sup>th</sup> % for gestational age)
- May lead to LBW, other risks (low blood sugar, cerebral palsy, anemia, bone disease). Linked to prepregnancy weight, birth interval & smoking.

**Assess Readiness for Change:** with open ended questions

- “What has your Dr told you about FGR?”
- “Tell me how the Dr said he wants to treat the FGR?”

**Discussion, Counseling and Education**

If the answer is:	Try Counseling Strategies	Try Education
<p><b>Not ready</b> →</p> <p>“He just said the baby isn’t growing and I would need to come in more often.”</p> <p>Raise awareness &amp; personalize change</p>	<ul style="list-style-type: none"> <li>• “Yes, he may see you every 2-6 weeks and talk about baby’s growth and your weight gain. How is eating going for you?”</li> <li>• “Your baby needs good nutrition since he is small. Shall we talk about foods for pregnancy?”</li> </ul>	<ul style="list-style-type: none"> <li>• “You are eligible for WIC because your Dr has diagnosed you with FGR. That means your baby is small. I can share with you good foods to help your baby grow, if you would like?”</li> <li>• <i>Knowledge: FGR means fetal weight is &lt;10%, measured by ultrasound or fundal (uterus) height</i></li> </ul>
<p><b>Record Plan or Goal</b> Mom accepted eating in pregnancy handout, overwhelmed by diagnosis. Re-assess readiness for change at next appointment.</p>		
<p><b>Unsure</b> →</p> <p>“I’m worried because I smoke. Do you think that is what caused it?”</p> <p>Raise awareness &amp; confidence &amp; identify barriers to change</p>	<ul style="list-style-type: none"> <li>• “Smoking is a risk factor, but your Dr would be the best person to answer that question. On a scale of 1-10, how open would you be to trying to quit smoking?”</li> <li>• “What things have you already tried to reduce your smoking?”</li> </ul>	<ul style="list-style-type: none"> <li>• Assisting with FGR:                             <ul style="list-style-type: none"> <li>○ Improve nutrition to support fetal growth</li> <li>○ Decrease/stop smoking</li> <li>○ Preventive: longer spacing between pregnancies</li> </ul> </li> <li>• <i>Knowledge: treatment depends on weeks gestation; delaying delivery &gt;34wks, monitoring amniotic fluid, may induce if concerned fetus’s wellbeing</i></li> </ul>
<p><b>Record Plan or Goal</b> Provided smoking cessation referral. Mom says she doesn’t think she can quit. Re-asses next appointment.</p>		
<p><b>Ready</b> →</p> <p>“The Dr said it was because I have high blood pressure (preeclampsia). He said eat less salt.”</p> <p>Help plan change-support</p>	<ul style="list-style-type: none"> <li>• “How have you been doing with the Dr’s advice? What salty foods are you limiting?”</li> <li>• “What other foods have you been avoiding?”</li> <li>• “Would you like a list of other foods high in salt to take with you?”</li> </ul>	<ul style="list-style-type: none"> <li>• “It sounds like you have heard about many high salt foods. Some others you may want to limit are: frozen dinners, soup broth, tomato juice and pickled products.”</li> </ul>
<p><b>Record Plan or Goal</b> Mom accepted sodium handout. Mom makes lots of soup; she plans to try low salt broth.</p>		

**Education Resources** <http://www.americanpregnancy.org/pregnancycomplications/fetalgrowthrestriction.htm> Resource- FGR  
<http://www.aafp.org/afp/980800ap/980800a.html> Resource- American Family Physicians-FGR