

Stillbirth Investigations Flowchart

Core investigations

Mother

- Maternal history
- Maternal examination
- Kleihauer-Betke or flow cytometry

Baby

- Clinical examination at birth
- Full autopsy

Placenta

- Macroscopic examination
- Histopathology studies
- Cytogenetic analysis

Findings from core investigations

Personal or family history of thrombosis

Suspected cholestasis

Non-consent for full autopsy

LGA

FGR or SGA

Placental abruption or infarction

Infection

Indicated selective investigations

APS (anticardiolipin, lupus anticoagulant, anti-B2 glycoprotein-1 antibodies)

Bile acids; LFTs

MRI; NIA; MIA; Clinical photographs

HbA1c

Infectious diseases (e.g. CMV); HbA1c; APS (anticardiolipin, lupus anticoagulant, anti-B2 glycoprotein-1 antibodies)

APS (anticardiolipin, lupus anticoagulant, anti-B2 glycoprotein-1 antibodies)

Further testing as directed by pathologist

APS: Antiphospholipid syndrome; CMA: Chromosomal microarray; CMV: Cytomegalovirus; FGR: Fetal growth restriction; LFTs: Liver Function Tests; LGA: Large-for gestational-age; HbA1c: Haemoglobin A1c; MIA: Minimally-invasive autopsy; MRI: Magnetic Resonance Imaging; NIA: Non-invasive autopsy; SGA: Small for gestational age

1: Perinatal Society of Australia and New Zealand Clinical Practice Guideline for Perinatal Mortality Audit Third Edition, December 2017