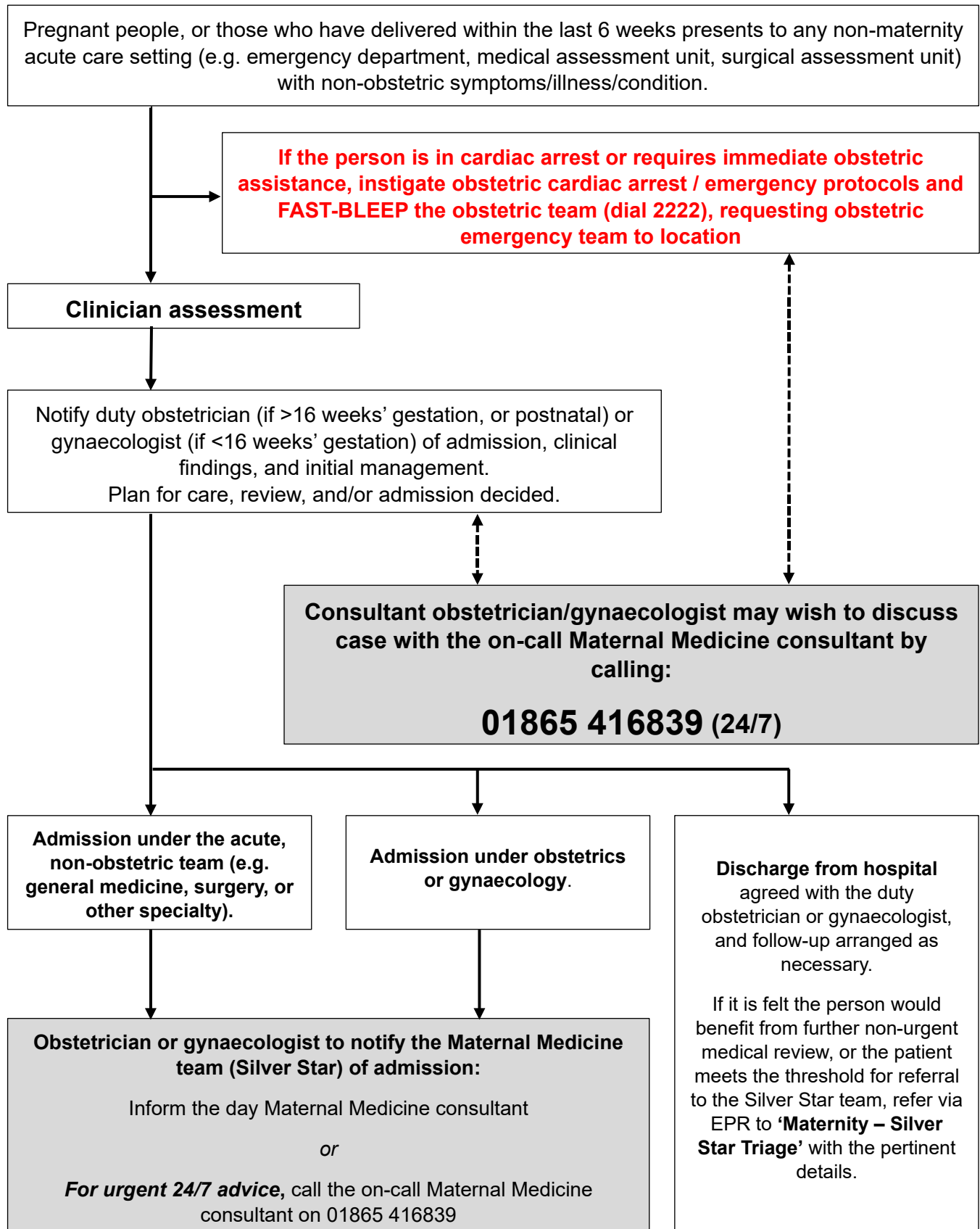


REFERRAL OF WOMEN OR BIRTHING PEOPLE FROM NON-OBSTETRIC ACUTE CARE SETTINGS WITH SYMPTOMS AND/OR CONDITIONS REQUIRING SPECIALIST MATERNAL MEDICINE EXPERTISE



[Full Guideline here](#)

APPENDIX 1 – Thresholds for referral to the Maternal Medicine Centre

The following is a suggested list of the complex medical problems which require discussion with, or referral to the MMC.

Category A conditions will usually be managed by local maternity teams.

Category B conditions may require referral to the MMC for advice and/or opinion.

Category C conditions are likely to need all care and birth at the MMC.

Cardiology		
Category A	Category B	Category C
Isolated atrial or ventricular ectopic beats	Arrhythmias that are problematic or requiring 2 or more agents	Pulmonary hypertension
Postural tachycardia syndrome (PoTS)	Left ventricular impairment (any cause)	Heart transplant
Non-problematic SVT	Pervious peripartum cardiomyopathy	Marfan Syndrome with dilated aorta (>40mm)
Ablated WPW	Hypertrophic cardiomyopathy with no high-risk features	Loeys-Dietz syndrome (irrespective of aortic dimensions)
Mild AS with no LV/RV dysfunction	Previous aortic dissection	Aorta >45mm in association with bicuspid aortic valve
Mild/moderate AR with no LV/RV dysfunction	Marfan syndrome with normal aorta	Turner's syndrome irrespective of aortic dimensions
Mild/moderate MR with no LV/RV dysfunction	Treated ischaemic heart disease	New ischaemic heart disease
Mitral valve prolapse	Myocarditis	Mechanical valve
Mild/moderate PS with no LV/RV dysfunction	Any bioprosthetic valve	Severe AS or with evidence of LV dysfunction
Mild/moderate PR with no LV/RV dysfunction	Moderate AS	Moderate/severe mitral stenosis
Mild/moderate TR with no LV/RV dysfunction	Severe AR or with evidence of LV dysfunction	Systemic right ventricle
Repaired ASD/VSD/PDA with no arrhythmia, LV/RV dysfunction	Bicuspid AV with aorta < 45mm	Fontan
	Mild MS	Cyanotic heart disease (unrepaired)
	MR severe or with evidence of LV dysfunction	Other complex congenital heart disease
	PS/PR severe or with evidence of RV dysfunction	
	Severe TR or evidence of RV dysfunction	
	Atrioventricular septal defect	
	Unrepaired ASD/VSD/PDA	
	Repaired tetralogy of Fallot	
	Unrepaired or repaired coarctation	

Neurology		
Category A	Category B	Category C
Stable epilepsy (provided there is access to specialist obstetric and neurology input) Stable, small cerebrovascular malformation, reviewed within 2 years of conception & plan for mode of delivery Previous cerebral vein thrombosis (CVT) Previous brain tumour Meningitis Previous encephalitis Stable multiple sclerosis Mononeuropathy e.g.: Bell's palsy, carpal tunnel, peroneal nerve compression Post-dural puncture headache Migraine Stable idiopathic intracranial hypertension	Unstable epilepsy (increasing seizure frequency, nocturnal seizures, status epilepticus) CVM, not reviewed within 2 years of conception New cerebral vein thrombosis (CVT) Previous intracranial haemorrhage Untreated intracranial aneurysm Previous Guillain Barre Syndrome Treated, stable myasthenia gravis Unstable multiple sclerosis New encephalitis Reversible Cerebral Vasoconstriction Syndrome (RCVS) Posterior Reversible Encephalopathy Syndrome (PRES) Spinal cord injury Neurofibromatosis Neuromuscular dystrophy Spinal muscular atrophy Motor neurone disease Previous ischaemic stroke Myotonic dystrophy Pituitary apoplexy Cluster headache	Neuromuscular disorders with respiratory muscle involvement e.g., myasthenia gravis, GuillainBarré syndrome Symptomatic raised intracranial pressure Unstable CVM/AVM/cavernoma Acute stroke New-onset Guillain-Barre syndrome

Respiratory

Category A	Category B	Category C
Uncomplicated Asthma Pneumonia TB Chronic Obstructive Airways Disease Pneumothorax Sarcoidosis without restrictive lung disease, no renal involvement Managed obstructive sleep apnoea/obesity hypoventilation	Complicated asthma: - Repeated presentations of asthma (≥ 3) in pregnancy - Asthma receiving biologics - Long-term corticosteroids Restrictive lung disease (e.g., ILD, kyphoscoliosis) with FVC $>50\%$ Any respiratory condition receiving immunotherapy / biologics Bronchiectasis New diagnosis of obstructive sleep apnoea/obesity hypoventilation in pregnancy COVID pneumonitis	Restrictive lung disease (e.g., ILD, kyphoscoliosis) with FVC $<50\%$ Cystic fibrosis Lung transplant

Haematology

Category A	Category B	Category C
Stable immune thrombocytopenia Gestational thrombocytopenia Current (>4 weeks before EDD) or previous VTE Obstetric antiphospholipid syndrome Inherited thrombophilia (except antithrombin deficiency) Alpha/beta thalassaemia trait Sickle cell trait B12/folate deficiency	White cell disorders New VTE in pregnancy: <4 weeks before EDD OR extensive Thrombotic antiphospholipid syndrome Stable myeloproliferative/myelodysplastic disease Beta thalassaemia major Haemophilia carrier with female fetus Aplastic anaemia Type 1 Von-Willebrand disease with normalised VWF Clotting factor deficiency Platelet function disorder	Sickle cell disease Previous or current HUS/TTP Complex thalassaemia: - iron overload - endocrine disease - pulmonary hypertension Antithrombin deficiency Carriers of haemophilia with male or unknown gender of fetus Von-Willebrand disease: Type 1 if VWF not normalised, Type II and Type III Transfusion dependent disease Paroxysmal nocturnal haemoglobinuria

GI / Hepatology

Category A	Category B	Category C
Hyperemesis gravidarum Constipation Gastro-oesophageal reflux disease Coeliac disease Uncomplicated inflammatory bowel disease Non-problematic chronic pancreatitis Gallstones Viral hepatitis Intrahepatic cholestasis Cholecystitis HELLP Previous bariatric surgery >2 years ago and stable weight	Achalasia Complex inflammatory bowel disease - active disease despite treatment Acute pancreatitis Unexplained jaundice Acute fatty liver of pregnancy Liver infarction/haematoma Autoimmune hepatitis Wilson's disease Crigler Najjar syndrome Primary biliary cirrhosis Primary sclerosing cholangitis Portal hypertension Cirrhosis Bariatric surgery within 2 years AND/OR ongoing significant weight loss or significant nutritional deficiency	Bowel transplant Complex pancreatitis • Not responding to tx • Recurrent disease • Hypertriglyceridemia • IR/surgical intervention Decompensated liver disease/liver failure Liver transplant

Rheumatology

Category A	Category B	Category C
Uncomplicated* rheumatoid arthritis Uncomplicated* seronegative arthritis: • Ankylosing spondylitis • Psoriatic arthritis • Reactive arthritis • IBD related arthritis Uncomplicated* connective tissue disease: • SLE • Scleroderma (restricted disease) • Sjogren's Osteoarthritis Hypermobile Ehlers Danlos (type III) Limited cutaneous scleroderma	Rheumatological disorders not controlled on current treatment or with evidence of extra-articular manifestations involving heart, lungs or kidneys Other Ehlers Danlos syndromes Polymyositis-dermatomyositis Behcet's syndrome SLE with renal (lupus nephritis in remission or controlled on treatment), cardiac or cerebral involvement Vasculitis in remission and no longer on treatment CREST syndrome (calcinosis, Raynaud's, oesophageal dysmotility, sclerodactyly and telangiectasia)	Vascular Ehlers Danlos Systemic sclerosis (scleroderma) Antisynthetase syndrome New vasculitis or vasculitis on treatment

Oncology		
Category A	Category B	Category C
Previous malignancy in remission	Current malignancy requiring treatment	Active haematological malignancy Progressive brain tumour
Renal		
Category A	Category B	Category C
Non-lupus glomerulonephritis/ tubulointerstitial nephritis: • No immunosuppression AND • Stable pre-pregnancy CKD stage 1-2 AND • uPCR <100 or uACR <30 AND • BP <140/90 Recurrent UTI Reflux nephropathy with normal kidney function, or CKD 1-2 Autosomal dominant polycystic kidney disease with normal kidney function AKI responding to treatment AKI due to pre-eclampsia resolved post-partum Single kidney Kidney stones	Non-lupus glomerulonephritis/ tubulointerstitial nephritis: • On immunosuppression OR • Pre-pregnancy CKD stage 3-4 OR • uPCR ≥100 or uACR ≥ 30 OR • BP ≥140/90 Reflux nephropathy with CKD 3-4 Autosomal dominant polycystic kidney disease with abnormal kidney function AKI not responding to treatment or not resolving post-partum Previous urinary tract reconstructive surgery Kidney disease requiring biologic treatment Progressive kidney disease in pregnancy Heavy proteinuria (>5g/24h) due to preexisting kidney disease Lupus nephritis in remission or controlled on treatment	Renal (+/- pancreas) transplant CKD 5 Dialysis Active lupus nephritis
Infectious Disease		
Category A	Category B	Category C
Latent or previously treated tuberculosis Tuberculosis stable on current treatment	HIV without access to specialist services AIDS Malaria in current pregnancy	None

Endocrinology		
Category A	Category B	Category C
Gestational diabetes mellitus Type I and II diabetes mellitus including diabetic retinopathy not requiring treatment during pregnancy or CKD 1 Hypothyroidism Hyperthyroidism and gestational hyperthyroidism Thyroid nodules Microprolactinoma PCOS Vitamin D deficiency	Type I and II diabetes mellitus with significant renal impairment (CKD 2 AND uPCR >30, OR CKD 3-5), autonomic neuropathy; cardiovascular disease; or retinopathy requiring treatment during pregnancy Uncontrolled hyperthyroidism Adrenal tumours Congenital adrenal hyperplasia Acromegaly Hyperparathyroidism Hypoparathyroidism Monogenic diabetes Macroprolactinoma Pituitary disease on hormone replacement therapy Addison's disease	Pheochromocytoma Cushing's syndrome Primary and secondary hyperaldosteronism
Metabolic Medicine		
Category A	Category B	Category C
None	None	Phenylketonuria Glycogen storage disorders Urea cycle defects Galactosaemic Fatty acid oxidation defects Peroxisomal disorders Inherited hypophosphatemia Lysosomal storage disorders