

No16 SECONDARY CARE PATHWAY FOR SUSPECTED/ CONFIRMED PRE-TERM PRE-LABOUR SPONTANEOUS RUPTURE OF MEMBRANES (PPROM) – 01/02/2026 V6

First call with suspected SROM- enquire re colour of liquor, fetal movements, uterine activity, maternal wellbeing, if no concerns raised- advise to put on pad and call back if remains suspected SROM. On second triage call (or concerns raised re liquor colour, fetal/ maternal wellbeing) invite in for review in day assessment unit.

Perform a full antenatal assessment and maternal observations
Review previous history of GBS/ infectious diseases
CTG ≥26 weeks only required when PPRM confirmed or if otherwise clinically indicated

Good history of SROM and liquor seen
Auscultate FH/CTG to be performed ≥26 weeks
Consider IUT if require depending on unit and gestation Preterm optimisation

Unable to confirm SROM
Lie supine for 20 minutes prior to speculum/amniotic leak detector

Inform on call obstetric team
Consider Vaginal Swab
Take bloods for FBC & CRP
Consider USS
If GBS +ve follow pathway 19
If infectious diseases follow local guideline
Erythromycin should be prescribed for 10 days/or before labour
Consider use of QUIPP app
Consider admission to antenatal ward as per local policy
If admitted inform NNU

Liquor seen

Unconfirmed but good history of SROM

No evidence of SROM:
Reassure, advise to return if further PV loss

Seek senior review
Consider repeat speculum/amniotic leak detector

No liquor seen or negative diagnostic test
Reassure and safety net

Liquor seen or test positive

Discharge

- Review investigation results prior to discharge
- Seen by Consultant team whilst inpatient to arrange plan of care is in place and documented
- Arrange a minimum of weekly review for maternal and fetal wellbeing (either in community or hospital as per local policy)
- Request fetal monitoring if concerned about movements
- Arrange ANC and scan as per individual need
- Provide contact numbers and patient information leaflet RCOG/Local or App
- Patient to contact Maternity service if feels unwell, temp ≥37.4°C, liquor colour changes or reduced fetal movements