

Fetal thoracic lesion

Inform woman of scan findings
Offer referral to Leeds FMU <3
working days

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Leeds FMU

- Detailed ultrasound assessment to confirm diagnosis and assess for additional structural anomalies.
- Offer invasive testing for qf-PCR & array-CGH in the presence of additional structural anomalies.
- Assess the size and character of lesion.
- Assess for presence of mediastinal shift, pleural effusions and fetal hydrops.
- Consider fetal echocardiogram.

If pleural effusion/s or large macrocytic lesion

Consider referral for
interventional
drainage or shunt.

If fetal hydrops

Offer TOP. Advise
post mortem
examination.

Leeds FMU

- Rescan every 2-4 weeks, depending on complexity of lesion, for change in lesion size and development of hydrops. (Can be shared care with local unit if uncomplicated.)
- Refer for antenatal paediatric surgical review +/- neonatology review.

Delivery

Multidisciplinary team input to discuss place of birth. Consider delivery at LGI if large lesion +/- mediastinal shift.