

Term small for gestational age newborn baby

Growth restriction of the newborn (GRN)

Diagnostic criteria

- BW < 3rd percentile
- OR**
- 3 or more of:
 - BW < 10th percentile
 - L < 10th percentile
 - HC < 10th percentile
 - Suspected FGR
 - Current pregnancy risk factor (e.g. congenital infection, hypertension, pre-eclampsia, diabetes)

Risk factors

- Primip or grand-multip, short interpregnancy interval
- Ethnicity (e.g. Aboriginal or Torres Strait Islander)
- Low socio-economic status
- Age < 16 or > 35 years
- Suspected FGR
- Previous FGR, SGA, stillbirth
- Co-morbidities (e.g. obesity)
- Substance use (e.g. smoking)
- Mental illness or eating disorder

Health implications

- Lower Apgars/acidosis
- Respiratory compromise
- Hypothermia
- Hypoglycaemia
- Hypocalcaemia
- Jaundice
- Feeding intolerance
 - Neurological delays
 - Obesity
 - Metabolic disorders

Suspected SGA/GRN

Care at birth

- Anticipate need for resus
- Immediate drying/warmth
- Consider paired BG/lactate
- Support delayed cord clamping (unless required to move for resus)
- Skin to skin
- Recommend placental histopathology
- Feed within 30–60 minutes

Assessment

- Review history
- Review EDD
- Plot BW, L, HC on growth charts
- Physical examination
- Assess for features of GRN
- Other assessments as indicated
- Document findings

Additional care

- Additional surveillance whilst minimising mother, baby separation
- Low threshold for escalation of care
- Referral as indicated
- Parental information and support

Care of baby: SGA/GRN

Thermoregulation

- Promote skin to skin
- Check temperature before feeds (at least first 24 hours)
- Delay first bath

Metabolic

- Monitor as clinically indicated:
 - Blood glucose
 - Calcium
 - Jaundice

Feeding

- Aim is to achieve *gradual* weight gain
- Individualised feeding plan
- Feed at least third hourly
- If PDHM/formula feeding, balance quota with tolerance
- If intolerance seek review
- Consider intravenous therapy or gavage feeds as required

Discharge considerations

- Feeding
- Weight
- Maintaining temperature
- Jaundice
- Parental readiness and ability to engage with follow-up

Follow-up

- Early post discharge appt
- Assess growth and development up to 2 years

BG blood gas, **BMI** body mass index, **BW** birth weight, **EDD** estimated due date, **FGR** fetal growth restriction, **GRN** growth restriction in the newborn, **L** length, **HC** head circumference, **PHDM** pasteurised human donor milk, **SGA** small for gestational age, **Resus** resuscitation, < less than, > greater than

Queensland Clinical Guideline. *Term small for gestational age newborn baby*. Flowchart: F22.16-1-V5-R27