

Prevention of Preterm Birth in Multifetal Gestation

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Content was originally presented at OB Challenges - Expecting the Unexpected on May 18, 2019.

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<u>Target Audience</u> - This presentation is intended for physicians, advanced practice providers, and other clinicians.

<u>Purpose</u> – Multifetal pregnancies are at high risk for preterm birth. Several strategies have been tried to reduce that risk, however, most are ineffective for uncomplicated multifetal pregnancy. Vaginal progesterone and cervical pessary appear promising for twin pregnancies with short cervical length.

<u>CME- ACGME/ABMS Competencies</u> addressed in this educational activity include Patient Care and Procedural Skills and Practice-Based Learning and Improvement.

<u>CNE-IOM Competencies</u> addressed in this educational activity include: Employ evidence-based practice.

<u>Desired Learning Outcome</u> - Clinicians will be able to discuss the advantages and disadvantages of vaginal progesterone, pessary, and cerclage for women with twin pregnancy and short cervix. Clinicians will implement at least one change in practice to reduce the risk of preterm birth.

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Faculty, Planners and Reviewer Disclosures

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No relevant financial relationships or conflicts of interest to disclose. FDA Disclosure: Arabin Pessary: Non-Approved device-Off-Label Use; Micronized Progesterone (vaginal or oral): Off-label use; Cervical Pessary (US brands): Off-label use; Betamethasone: Off-label use.

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<u>Commercial Support</u> - There is no commercial support for this educational activity. Please note that the content of this educational activity was originally presented at a live conference (OB Challenges – Expecting the Unexpected) on May 18, 2019.

<u>Participation and Contact hour(s)</u> - Participants are expected to review all content in the video, access reference materials as needed for additional self-directed learning, take and score 70% or greater correct on the post test, and complete the evaluation in order to earn AMA PRA Category 1 Credit(s)™ and/or nursing contact hour(s).

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