

Nitrazine Paper Test

[Knight-zine](#)

Normally, the vagina has an acidic pH. In PROM, the Nitrazine paper turns blue, due to the alkaline pH of amniotic fluid.

Ultrasound

[Ultrasound-machine](#)

Ultrasound should be utilized to monitor fetal growth and the amount of amniotic fluid present. It is important to identify oligohydramnios (amniotic fluid index (AFI) ≤ 5 cm or single deepest pocket (SDP) < 2 cm), as this may be associated with PROM.

Treatment

Consider Tocolytics

[Taco-lights](#)

Tocolysis is the inhibition of myometrial contractions. Therefore, tocolytic medications slow down or inhibit the onset of labor. If uterine contractions occur, tocolysis is contraindicated.

Consider Antibiotics

[ABX-guy](#)

If signs and symptoms of chorioamnionitis are present (maternal fever and uterine tenderness in the presence of PROM, in the absence of UTI or URI), then obtain cervical cultures, and begin broad-spectrum IV antibiotic therapy and initiate delivery.

34 Weeks Gestation

[Less-than \(30\) Dirty \(4\) Fork](#)

At less than 34 weeks gestation, corticosteroids are given.

Corticosteroids

[Quarter-on-steroids](#)

Corticosteroids are given to women less than 34 weeks gestation to hasten fetal lung development.

> 34 Weeks Gestation

[Greater-than \(30\) Dirty \(4\) Fork](#)

At more than 34 weeks gestation, the preferred management is induction of labor.

Induction of Labor

[Labor Induction-duck](#)

Women with term PROM should undergo prompt induction of labor if they are more than 34 weeks gestation. Oxytocin (a synthetic analog of the hormone produced in the hypothalamus) or prostaglandins may be used as an inducing agent.