

Maternal and Fetal AE summary as per Delphi consensus from EVERREST International AE consortium.

Maternal AEs	Fetal AEs
Post-partum haemorrhage	Fetal fluid collection
Haemorrhage in pregnancy	Haemorrhage in pregnancy: fetal grading criteria
Anaemia of pregnancy	Anaemia of pregnancy: fetal grading criteria
Chorioamnionitis	Chorioamnionitis: fetal grading criteria
Preterm premature rupture of the membranes (PPROM)	PPROM: fetal grading criteria
Gestational hypertension	Fetal bradycardia (non-labour)
Pre-eclampsia	Fetal tachyarrhythmia
Eclampsia	Cardiac function abnormality
Premature labour	Abnormal brain imaging
Puerperal infection	Abnormal gastrointestinal imaging
Retained placenta or membranes	Abnormal musculoskeletal imaging
Amniotic fluid embolism	Abnormal renal imaging
	Fetal neoplasm
	Fetal structural abnormality: not otherwise classified
	Abnormal fetal growth
	Fetal movement disorder
	Procedural haemorrhage
	Post-procedural haemorrhage
	Fetal intraoperative injury

General principles for fetal AE grading

- AE severity graded independently for the pregnant woman and fetus
- Pregnancy conditions can affect the mother and the fetus separately
For example chorioamnionitis, haemorrhage in pregnancy can affect both quite differently.
- Fetal AEs were defined as being diagnosable in utero with potential to cause detriment to the fetus

Fetal AE grading

Grade 1 (mild)	Grade 2 (moderate)	Grade 3 (severe)	Grade 4 (life-threatening)	Grade 5 (death)
Clinical observation of uncertain significance Resolves spontaneously Low risk of long-term consequences	Likely to resolve spontaneously Low risk of long-term consequence Requires increased frequency of monitoring, but less than once a week Requires additional tests	Requires increased frequency of monitoring, once a week or more; Likely to lead to significant neonatal morbidity	Likely to lead to fetal injury or permanent disability Likely to lead to neonatal death Requiring a substantive change in management including changing the course of an interventional procedure or necessitating delivery	Fetal death