

How do I work out when my baby is due and how does the due date affect my care?

On 1 September 2021, we changed the way we calculate due dates by using the crown rump length (CRL). This leaflet aims to explain how this will affect your care during pregnancy.

Explanation

For centuries women had no real idea when their baby might be born and based a likely due date on being about five months after their 'quickening,' which was feeling first movements of the baby. For the last 200 years, most calculations have been based on the so-called Naegele's rule that a pregnancy lasts for 280 days (or 40 weeks) taken from the first day of the last period, but assumes a woman has a very regular 28-day cycle and has correctly remembered the first day to do the calculations. It also makes an assumption about when conception might have occurred, but as sperm can survive for up to five days and still fertilise a freshly released egg, and the fact that most of us have no exact date for when we ovulate, means that it is a 'good guess.' Most of the commercial apps you can download are based on this historic 'rule,' and so are somewhat inaccurate.

Ultrasound dating has been routinely available for the last 20 years, and a scan is highly accurate at measuring how long a woman has been pregnant and working out her most likely due date. We should be using this date in your screening tests (the blood test taken after the scan for Down's syndrome and other chromosome screening tests) to ensure that the results are based on the exact length of your pregnancy and not a slightly unreliable 'best guess' estimate. Errors in length of pregnancy can change some women's results from high to low risk or from low to high. The margin of error using a scan is approximately:

+/- 5 days until 16 weeks

+/- 10 days at or after 16 weeks

In line with Public Health England (PHE) and Royal College of Obstetricians and Gynaecologists (RCOG) guidelines, at the Royal Berkshire Hospital we now use the ultrasound date as the most accurate one for timing tests, and for booking Caesareans or inductions of labour as needed.

It is still important to remember that most babies are not born on the "due date" and that your baby can be born any time between 37 and 42 weeks (although most babies are born by 41 weeks). Only 4.4% of babies come on their due date so while we use a "due date" to help us with our screening tests, you can expect your baby to be born any time in that bigger window.

Reading Maternity Voices
Reading, Wokingham & West Berkshire

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Why has my due date changed?

Your due date used to be worked out by the date of your last period.

Errors in your due date can determine whether your screening results come out as low risk or high risk.

But this assumes you have a 28 day cycle AND that you conceived on day 14, which is often wrong.

So we use your scan date when carrying out screening tests and when booking any induction of labour or caesareans.

Because it's safer for you and your baby if we have an accurate due date.

You may have worked out your own due date based on knowing when you ovulated or conceived. In this case, you can discuss this with your midwife or doctor and they will take this into consideration when making decisions around your care.

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

S Arora, Associate Specialist US, September 2021
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Our Maternity Strategy and Vision

'Working together with women, birthing people and families to offer compassionate, supportive care and informed choice; striving for equity and excellence in our maternity service.'

You can read our maternity strategy here

Compassionate Aspirational Resourceful Excellent