

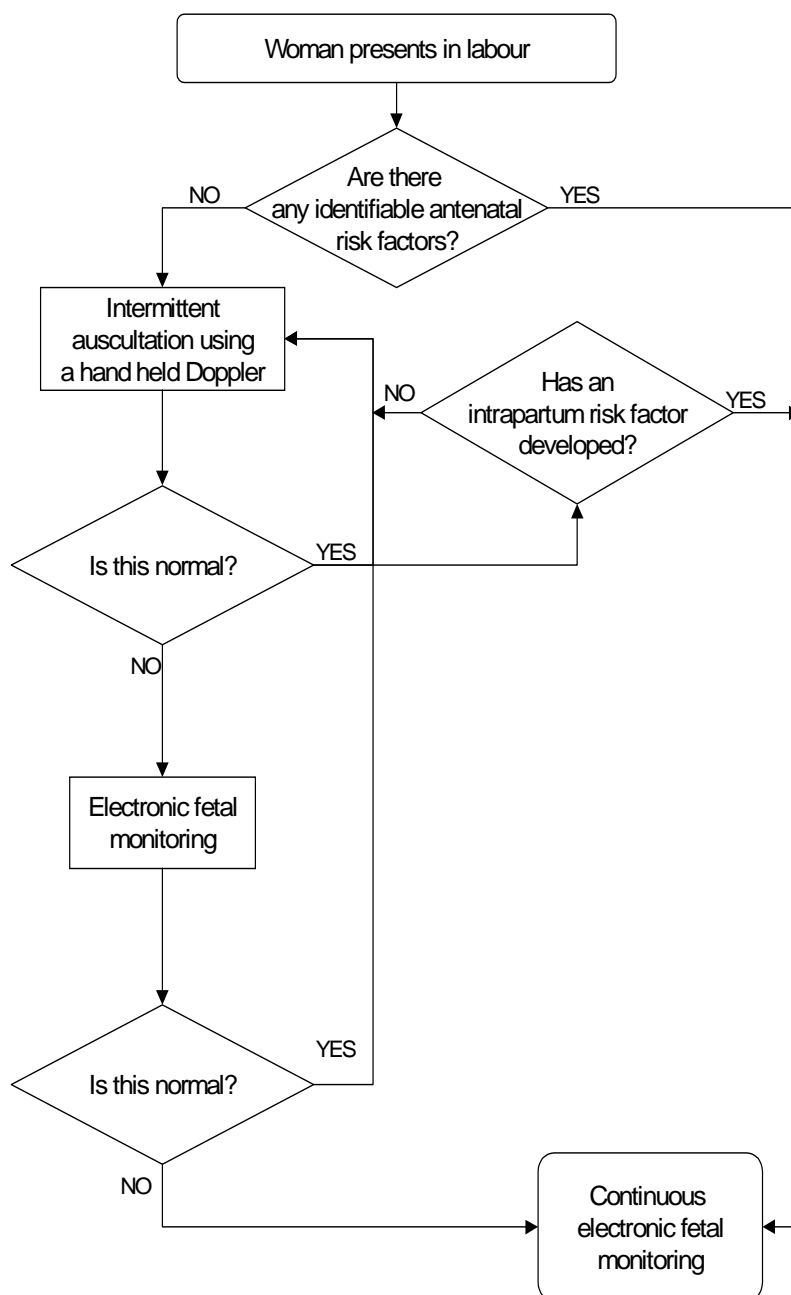
5 INTRAPARTUM CARE

5.6 INTRAPARTUM FETAL HEART RATE MONITORING

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5.6.2 L&BS QRG Intrapartum Fetal Surveillance
Section B
Clinical Guidelines
King Edward Memorial Hospital
Perth Western Australia

5.6.2 LABOUR AND BIRTH SUITE QUICK REFERENCE GUIDE INTRAPARTUM FETAL SURVEILLANCE¹



Antenatal risk factors

Increased risk of fetal compromise

including:

- Abnormal antenatal CTG
- Abnormal Doppler umbilical artery velocimetry
- Suspected or confirmed intrauterine growth restriction
- Oligohydramnios or polyhydramnios
- Prolonged pregnancy >42 weeks
- Multiple pregnancy
- Breech pregnancy
- Antepartum haemorrhage
- prolonged rupture of membranes (>24hours)
- known fetal abnormality which requires monitoring
- pre-eclampsia
- diabetes (on insulin or poorly controlled or with fetal macrosomia)
- other current or previous obstetric or medical conditions which constitute a significant risk of fetal compromise

Intrapartum risk factors

- Induction of labour with prostaglandin / oxytocin
- Abnormal auscultation or CTG
- Oxytocin augmentation
- Epidural analgesia
- Abnormal vaginal bleeding in labour
- Maternal pyrexia >38°C
- Meconium or blood stained liquor
- Absent liquor following amniotomy
- Active first stage of labour >12hours (ie regular uterine activity, cervix 4cm dilated)
- Active second stage of labour (ie pushing) > one hour where birth is not imminent
- Pre-term labour less than 37 completed weeks

1. RANZCOG. Intrapartum Fetal Surveillance. **Clinical Guidelines** 2006:Second edition.