Intrapartum Fetal Surveillance - Fourth Edition

ASK THE QUESTION!
Are there identifiable antenatal risk factors?

Consider CTG where multiple factors are present:

**Antenatal Risk Factors**
- abnormal antenatal CTG
- abnormal Doppler umbilical artery velocimetry
- suspected or confirmed IUGR
- oligohydraminos or polyhydraminos
- prolonged pregnancy ≤ 42 weeks
- multiple pregnancy
- breech presentation
- antepartum haemorrhage
- prolonged rupture of membranes (> 24 hours)
- known fetal abnormality which requires monitoring
- uterine scar
- essential hypertension or pre-eclampsia
- diabetes where medication is indicated or poorly controlled, or with fetal macrosomia
- other current or previous obstetric or medical conditions which constitute a significant risk of fetal compromise
- fetal movements altered unless there has been demonstrated wellbeing + return to normal fetal movements
- morbid obesity (BMI ≥ 40)
- maternal age ≥ 42
- abnormalities of maternal serum screening associated with an increased risk of poor perinatal outcomes
- abnormal placental cord insertion
- abnormal cerebroplacental ratio

**Intrapartum Risk Factors**
- maternal pyrexia ≥37.8 and <38 degrees
- induction of labour with prostaglandin/oxytocin
- abnormal auscultation or CTG
- oxytocin augmentation
- regional anaesthesia
- abnormal vaginal bleeding in labour
- maternal pyrexia ≥38°C
- meconium or blood stained liquor
- absent liquor following amniotomy
- prolonged first stage as defined by referral guidelines
- prolonged second stage as defined by referral guidelines
- pre-term labour less than 37 completed weeks
- tachysystole
- uterine hypertonus
- uterine hyperstimulation

ASK THE QUESTION!
Has an intrapartum risk factor developed?

Continuous EFM

Intermittent Auscultation

Normal

EFM

Abnormal

Abnormal

Disclaimer: This algorithm is for general guidance only and is subjective to a clinician’s expert judgement. The algorithm should not be relied on as a substitute for clinical advice.