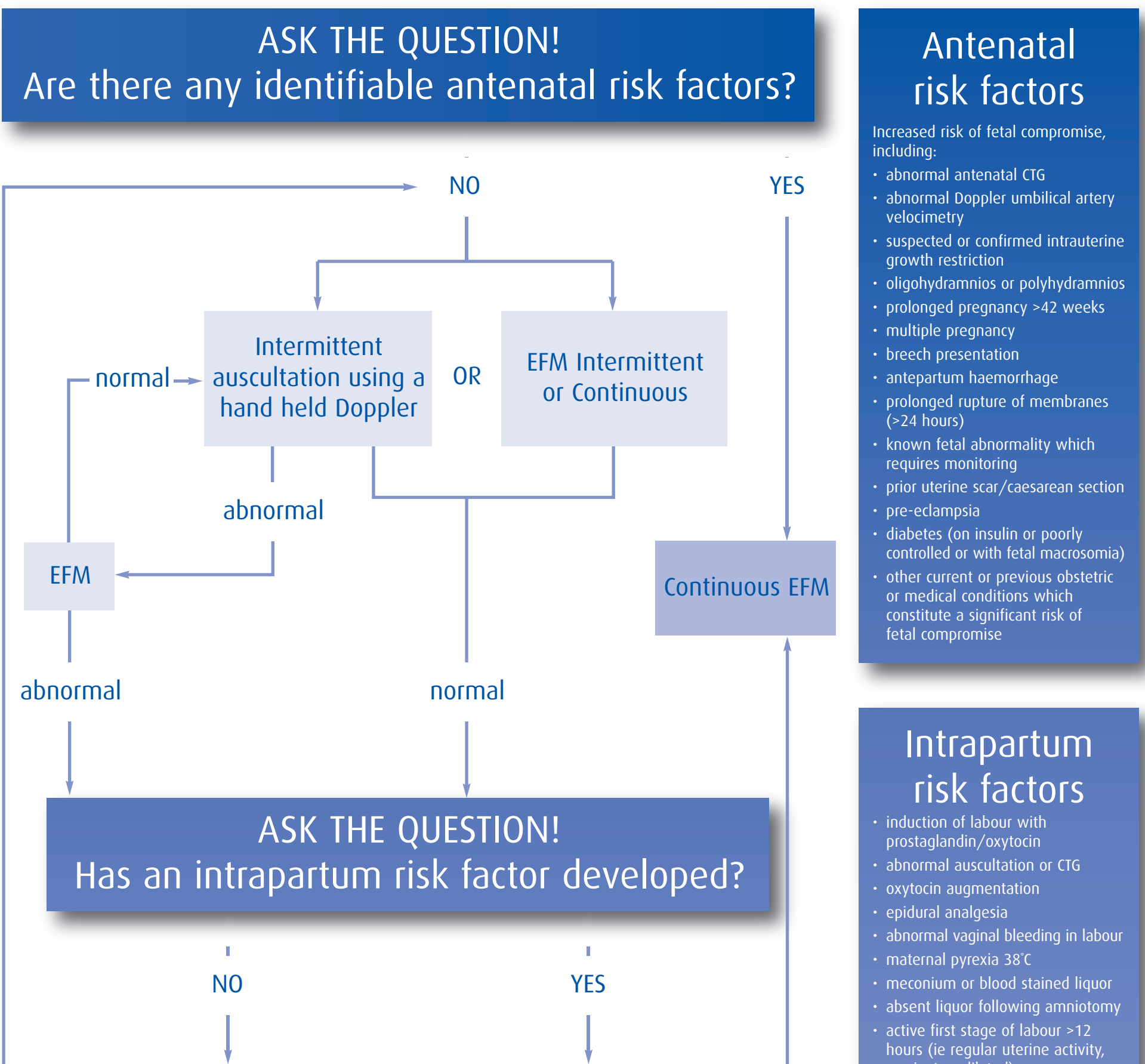




Intrapartum Fetal Surveillance

Clinical Guidelines – Algorithm



- ### 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 presentation
 - antepartum haemorrhage
 - prolonged rupture of membranes (>24 hours)
 - known fetal abnormality which requires monitoring
 - prior uterine scar/caesarean section
 - 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 >12 hours (ie regular uterine activity, cervix 4cm dilated)
 - active second stage (ie pushing) >1 hour where delivery is not imminent
 - pre-term labour less than 37 completed weeks

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