

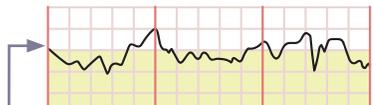
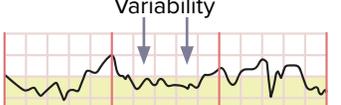
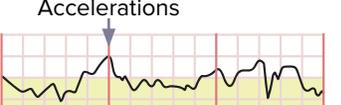
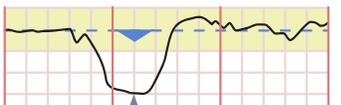
# BASIC REVIEW OF FETAL MONITORING STRIPS



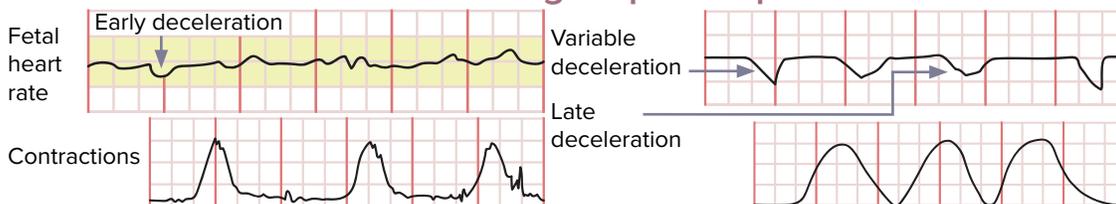
NICHD sets guidelines for fetal monitoring:

Category I	Category II	Category III
Normal	Abnormal	Abnormal
Fetal acid-base status: well-oxygenated baby	Indeterminate: compensatory response	Fetal acid-base status: compromised

## Components of fetal monitoring assessment

Baseline	Variability	Accelerations	Decelerations
Mean bpm (rounded to 0 or 5) over a 10-min interval, excluding periodic changes and marked variability. Must be identifiable for 2 minutes, otherwise, it is considered indeterminate.	Fluctuations in baseline that are irregular in amplitude and frequency, measured from peak to trough over 10-min interval	An abrupt increase in fetal heart rate above baseline	A decrease in fetal heart rate below baseline
 <p>Baseline</p> <ul style="list-style-type: none"> <li>• Bradycardia = below 110 bpm</li> <li>• Normal = 110 to 160 bpm</li> <li>• Tachycardia = over 160 bpm</li> </ul>	 <p>Variability</p> <ul style="list-style-type: none"> <li>• Absent = amplitude undetectable</li> <li>• Minimal = amplitude 0 to 5 bpm</li> <li>• Moderate = amplitude 6 to 25 bpm</li> <li>• Marked = amplitude over 25 bpm</li> </ul>	 <p>Accelerations</p> <ul style="list-style-type: none"> <li>• &gt; 32 weeks: peak <math>\geq</math> 15 bpm above baseline, last <math>\geq</math> 15 secs</li> <li>• &lt; 32 weeks: peak <math>\geq</math> 10 bpm above baseline, last <math>\geq</math> 10 secs</li> </ul>	 <p>Decelerations</p> <ul style="list-style-type: none"> <li>• <b>Early:</b> a gradual decrease and return to baseline associated w/ a contraction. Nadir of decel and peak of contraction happen at same time.</li> <li>• <b>Late:</b> a gradual decrease and return to baseline associated with a contraction. Nadir of decel occurs after peak of contraction.</li> <li>• <b>Variable:</b> an abrupt decrease below baseline. The decrease is <math>\geq</math> 15 bpm, lasting <math>\geq</math> 15 secs and &lt; 2 minutes from onset to return to baseline.</li> </ul>

## Fetal monitoring strip examples



Normal fetal heart rate tracing NICHD category 1
<b>Baseline:</b> 110–160 bpm <b>Variability:</b> moderate <b>Accelerations:</b> present <b>Decelerations:</b> none or early decelerations only

Abnormal fetal heart rate tracing NICHD category 2 or 3
<b>Baseline:</b> < 110 bpm or > 160 bpm <b>Variability:</b> absent, minimal, or marked <b>Accelerations:</b> none or less than expected for gestational age <b>Decelerations:</b> variable, late decelerations present

**Variable and late decelerations require immediate intervention.**

- Reposition
- Oxygen 10 L/min
- Cervical exam
- Turn off oxytocin
- Fluid bolus
- Call provider

**CLINICAL TIP:**

The first nursing intervention for an abnormal fetal heart tracing is to reposition the client to their left side to maximize blood flow and oxygen to the fetus.

## NOTES

