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Class Prep – Fetal Monitoring

Using your textbook (pp. 355-373, 383-385) and the provided PowerPoint, answer the following questions.

1. What are common causes of fetal tachycardia?
(Baseline >160 BPM for 10 min or longer) early sign of fetal hypoxemia, maternal fever/infection, fetal anemia, response to drugs (atropine, hydroxyzine, terbutaline, cocaine, methamphetamines), maternal hyperthyroidism (causing fetal hyperthyroidism and tachycardia), abnormalities involving fetal cardiac pacemakers/cardiac conduction system
2. What causes late decelerations?
(Gradual decrease in and return to baseline FHR associated with UCs → Reflex fetal response to transient hypoxemia during a uterine contraction that reduces delivery of oxygenated blood to intervillous space of placenta) maternal hypotension, uterine tachysystole
3. What causes variable decelerations?
(Visually abrupt decrease in FHR below baseline: at least 15 BPM below baseline for 15 secs and returns to baseline less than 2 mins from onset → compression of blood vessels in umbilical cord, can occur w/o UCs) fetal vagal response to umbilical cord stretching, head compression as fetus descends in pelvis during labor
4. What is the cause of early decelerations?
(Gradual decrease in and return to baseline FHR associated with UCs → transient fetal head compression, considered normal/benign) vaginal examinations (fundal pressure), placement of internal fetal monitoring
5. What are accelerations a response to?
(Visually abrupt increase in FHR below baseline: at least 15 BPM above baseline for 15 secs and returns to baseline less than 2 mins from onset, periodic or episodic) associated with fetal movement, spontaneous, transient compression of umbilical vein
6. What is the normal range for the fetal heart rate?
110-160 BPM
7. What category tracing (I, II, or III) clearly indicates a fetus in distress?
Category III
8. What equipment is used to evaluate contractions with external monitoring?
Ultrasound transducer, tocotransducer
9. What fetal heart pattern is the most concerning?
Absent variability
10. What is the most important indicator of fetal status?
Variability