

Name: Sheila Velasquez

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?

An early sign is fetal hypoxemia, especially with decelerations and minimal/absent variability. Common causes can be caused by maternal fever or infection, fetal anemia, or response to medications like atropine or drugs like cocaine,

2. What causes late decelerations?

What causes late decelerations is by a reflex fetal response to hypoxemia during a UC (uterine contractions) that reduces delivery of oxygenated blood to the placenta.

3. What causes variable decelerations?

It is caused by the compression of blood vessels in the umbilical and can occur with or without UCs.

4. What is the cause of early decelerations?

It is caused by fetal head compression. Early decelerations is considered to be something normal.

5. What are accelerations a response to?

Accelerations can either be periodic/episodic. Can occur with fetal movement or spontaneous. Acceleration occurs when there is an interruption of fetal oxygenation is not happening.

6. What is the normal range for the fetal heart rate?

Normal range: 110-160

7. What category tracing (I, II, or III) clearly indicates a fetus in distress?

Category 3 indicates a fetal distress. Immediate evaluation and intervention is required.

8. What equipment is used to evaluate contractions with external monitoring?

The equipment used is a tocodynamometer.

9. What fetal heart pattern is the most concerning?

Fetal baseline bradycardia

10. What is the most important indicator of fetal status?

Name: Sheila Velasquez

Fetal Spiral Electrode (FSE)

Variability – the most important indicator of reassuring fetal status!