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## **Class Prep – Fetal Monitoring**

Using your textbook (pp. 356-373, 383-385) and the provided PowerPoint, answer the following questions.

1. What are common causes of fetal tachycardia?

Common causes of fetal tachycardia are fetal hypoxemia, fetal cardiac arrhythmias, maternal fever, infection, fetal anemia, drugs, or maternal hyperthyroidism.

2. What causes late decelerations?

Causes of late decelerations are placenta previa, placental abruption, fetal growth restriction, diabetes mellitus, epidurals, or uterine tachysystole.

3. What causes variable decelerations?

The causes of variable decelerations could be a short cord, prolapsed cord, knot in cord, cord around the fetus, or maternal position with the cord between the fetus and maternal pelvis.

4. What is the cause of early decelerations?

The causes of early decelerations are uterine contractions, vaginal exam, fundal pressure, or placement of internal mode of monitoring.

5. What are accelerations a response to?

Accelerations are a response to fetal movement, when there is compression of the umbilical vein, causing decreased fetal return and a reflex rise in the heart rate.

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

The normal range for the fetal heart rate is 110-160 bpm.

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

Category III clearly indicates a fetus in distress.

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

A tocotransducer is used to evaluate contractions with external monitoring.

9. What fetal heart pattern is the most concerning?

Late decelerations are the most concerning fetal heart pattern.

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

The most important indicator of fetal status is the fetal heart rate.