

Basic Steps to Fetal Heart Monitor Interpretations

Baseline – mean FHR rounded to increment of 5 beats per min during a 10 minute window

Normal Range 110-160

Bradycardia < 110

Tachycardia > 160



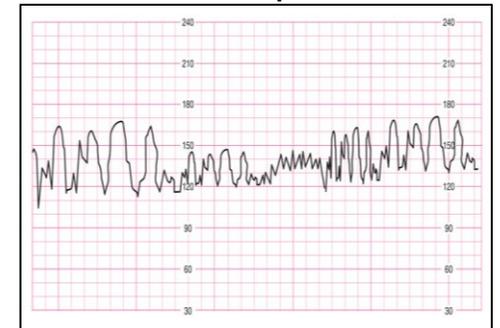
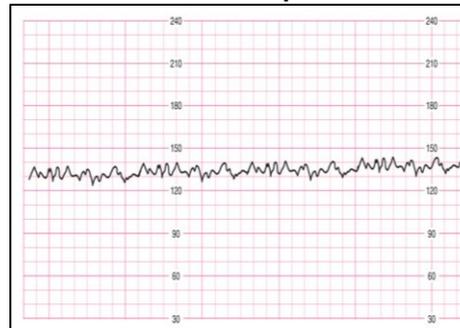
Variability – fluctuation in the baseline FHR that are irregular in amplitude and frequency

Absent
0-1

Minimal
≤ 5 bpm

Moderate
6-25 bpm

Marked
> 25 bpm

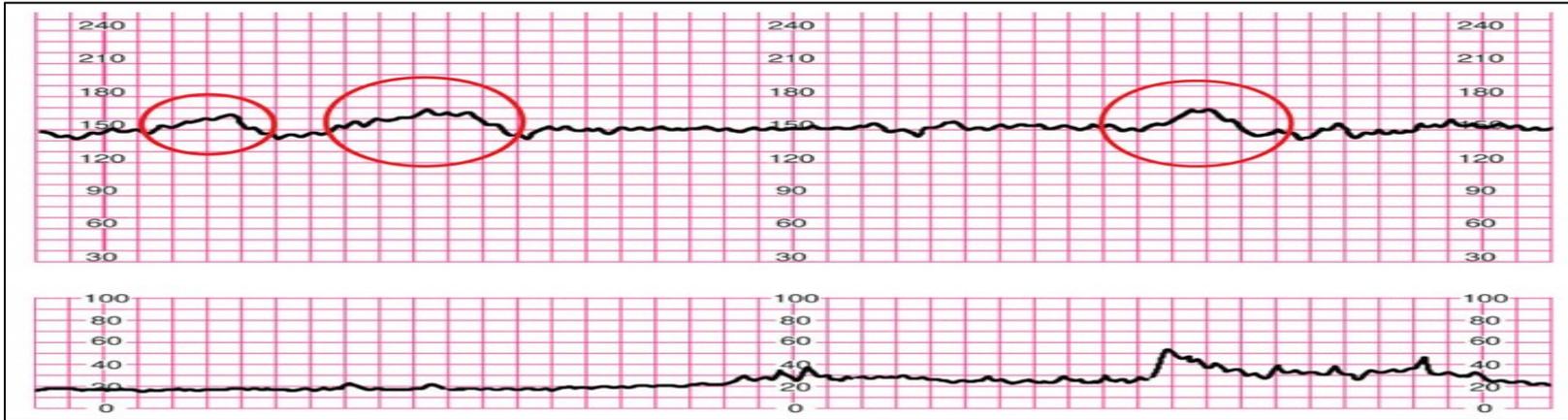


Accelerations / Decelerations

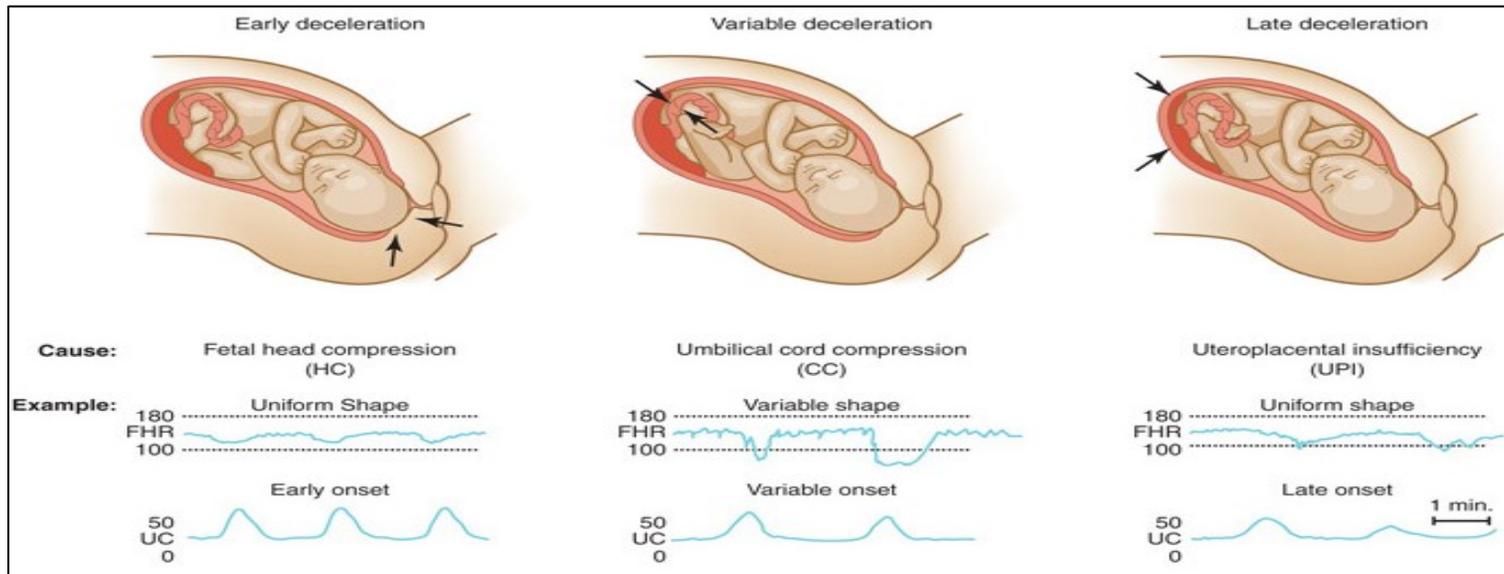
Periodic – in relation to uterine contractions & persist over time

Episodic – pattern not associated with contractions

Accelerations



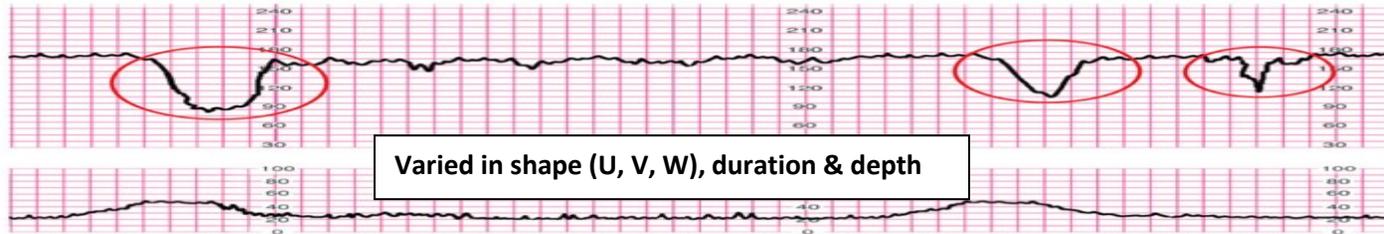
Decelerations



Type
Variable

Mechanism
Cord Compression

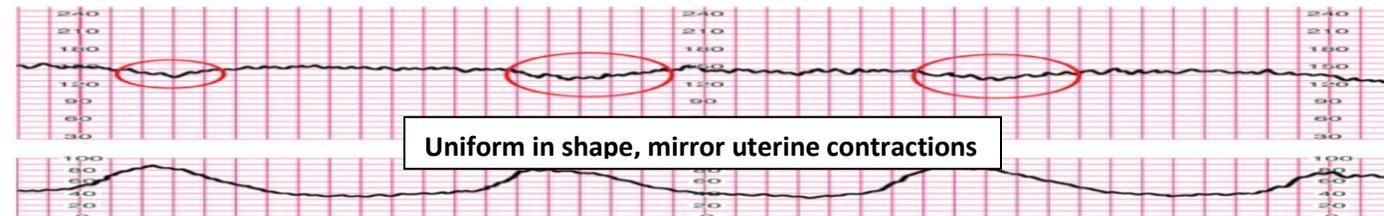
Nursing Treatment
Re-position, Consider Vaginal Exam



Early

Head

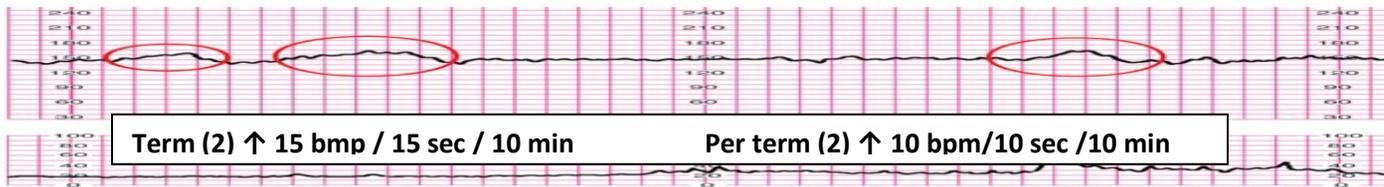
Vaginal Exam for possible descent



Acceleration

Ok

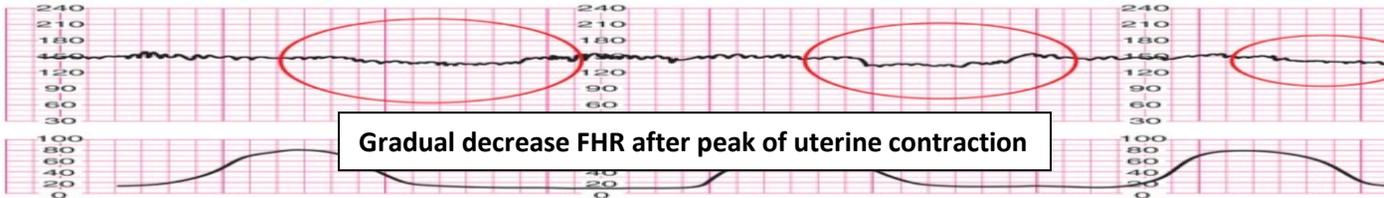
Continue to observe



Late

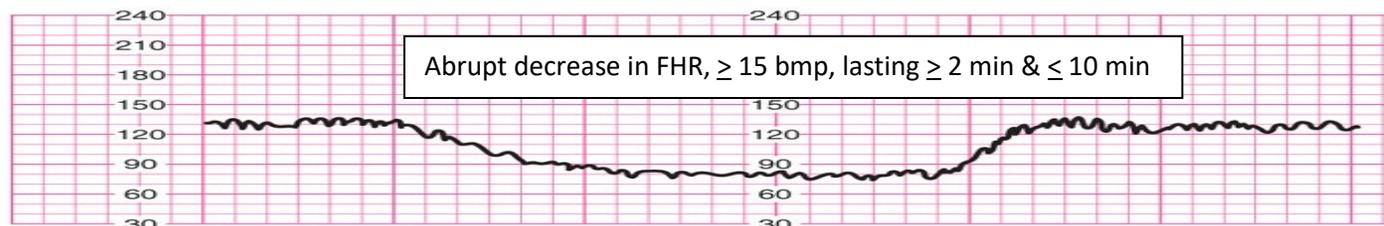
Placenta Insufficiency

Intrauterine Resuscitation (turn, ↑IV, O2, Pit off)



Prolonged Decel. Profound fetal O2 Change

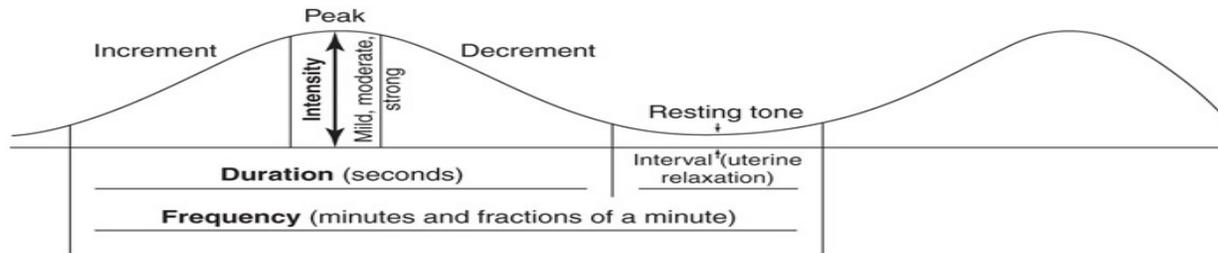
Check for Cord, rapid Fetal Descent



Uterine Contraction

Frequency – start of UC to start of next UC - usually reported in minutes

Duration – start to end on UC – usually reported in seconds



Strength -

Palpation

Mild

Moderate

Strong

IUPC (intrauterine pressure catheter) - Reported in mmHg