

Fetal heart rate monitoring in labour



Obstetrics & Gynaecology

patient**information**

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Slovak

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Slovensky

Kurdish Sorani

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Arabic

عربي
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Urdu

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اگر آپ یا آپ کے جاننے والے کسی شخص کو اس دستاویز کو سمجھنے یا پڑھنے کیلئے مدد کی ضرورت ہے تو برائے مہربانی مندرجہ بالا نمبر پر ہم سے رابطہ کریں یا ہمیں ای میل کریں۔

Farsi

فارسی
اگر جناب عالی یا شخص دیگری که شما او را می شناسید برای خواندن یا فهمیدن این مدارک نیاز به کمک دارد لطفاً با ما بوسیله شماره بالا یا ایمیل تماس حاصل فرمایید.

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Fetal heart rate monitoring in labour

During your pregnancy, the midwives and doctors caring for you will monitor your baby's well-being by assessing your general health, checking your baby is growing, and listening to your baby's heartbeat. During labour, the midwives and doctors will continue to monitor you and your baby, and pay particular attention to your baby's heart rate pattern.

This leaflet outlines Fetal Heart Rate (FHR) monitoring in labour, ways it is done, choice of monitoring, what the tracing means, and further tests that can be performed.

How FHR monitoring is performed in labour

These are two ways FHR monitoring can be performed:

- Firstly, the midwives can use a Pinards ('trumpet-shaped' instrument), or a Sonic-aid (small electronic hand-held device, which allows you to hear your baby's heart beating).
- Secondly, the midwives can use a machine called a Cardiotocograph or CTG. This makes a printout of your baby's heart rate, and also records tightening or contractions in your uterus (womb).

Your choice will always be respected as to how your baby is monitored.

Your choice of monitoring

Intermittent FHR monitoring

For women who are healthy, and have an uncomplicated pregnancy, the FHR will be monitored by Pinards and/or Sonic-aid.

The midwife will listen to your baby's heart rate at regular intervals during labour. If the midwife is happy, she will continue listening to the FHR in this way during the whole of labour.

If the midwife or doctor (obstetrician) has any concerns a CTG tracing will be started. It may be that once the tracing has been performed, the midwife and/or doctor (obstetrician) will be happy to continue with the Sonic-aid or Pinards, or it may be that CTG tracing will continue during the rest of labour.

Continuous FHR monitoring

For women who have complications in pregnancy, labour, or who have health problems themselves, CTG tracing will be recommended for FHR monitoring in labour.

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Examples of women who would be recommended to have CTG tracing in labour include:

- Induction of labour
- If labour needs speeding up
- Epidural for pain relief
- If baby passes meconium (opens bowels) before it is born
- Previous caesarean
- Raised blood pressure
- Ruptured membranes (waters gone) over 24 hours
- Diabetes
- Bleeding in pregnancy or during labour
- Premature labour
- Reduced amount of fluid around the baby, seen on scan
- When baby has not been growing very well
- Twins or triplets
- Breech

For the CTG machine to record your baby's heart rate and contractions, you usually have two straps attached to your abdomen (tummy). One strap holds the 'toco' (sensor to monitor contractions) in place. The second strap usually holds the 'transducer' (fetal heart rate detector).

Fetal heart rate monitoring in labour

Sometimes in labour, the baby's heart rate is difficult to record when using the abdominal transducer. This can be due to the baby's position, mothers physical build, or the position the women gets into during labour. If this happens, a 'clip' can be attached to the baby's head during a vaginal examination. This is not a routine procedure but is sometimes necessary. This does not hurt the baby. The clip will be removed as the baby is born.

CTG Tracings

The midwives and doctors look at different elements of the CTG trace. These include the usual rate of the fetal heart (FHR), the amount the FHR changes each time it beats, whether the FHR increases or decreases, and the frequency and strength of contractions.

These are all considered in relation to how the labour is progressing, and whether there have been any complications in pregnancy or labour.

The midwives and doctors can generally look at a CTG tracing and say whether it is 'reassuring' and that the baby is coping well in labour, or 'non-reassuring', in which case further tests may be offered.

Further tests

If the midwives and doctors are unsure if your baby is coping with labour, then Fetal Blood Sampling (FBS) may be offered.

FBS can only be performed if the Cervix (neck of the womb) is open wide enough for the doctors to obtain a very small sample of blood from your baby's head. This does not harm the baby.

The FBS indicates how the baby is coping with labour and can be repeated. If the FBS indicates that the baby is not coping well then a caesarean may be advised (unless the cervix is fully open and the baby could be born vaginally).

If you are in early labour, FBS may not be possible, as the cervix may not be open wide enough. If the CTG tracing remained non-reassuring for a long period of time, then it may be recommended that the baby be born by caesarean section.

Summary

- All babies have FHR monitoring in labour whether it is intermittent with Sonic-aid and/or Pinards, or continuous CTG machine.
- Progress and events in labour are different for all women. Some women may start on intermittent monitoring, but then due to events in labour, it may be advised to change to continuous FHR monitoring.
- The CTG tracings can cause you and your partner anxiety. If you have any concerns, you can ask the midwife looking after you to explain more about the tracing.
- The thought of your baby having to have a blood test in labour, to see how he/she is coping, is very frightening. It is performed only if it is absolutely necessary. The midwives and doctors looking after you and your partner will explain why the test is required, and the possible events that may occur.
- If you have any questions about what you have read in this leaflet about FHR monitoring in labour, please ask a midwife or doctor.

Fetal heart rate monitoring in labour

How to contact us

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Labour Ward

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Switchboard

Telephone 01709 820000

Useful contact numbers

NHS Direct

Telephone 0845 4647

Health Info

Telephone 01709 427190

Stop Smoking Service

Telephone 01709 422444

Patient Services

Telephone 01709 424461

A&E

Telephone 01709 424455

For GP out of hours, contact your surgery

Useful websites

www.nhs.uk

www.direct.gov.uk

www.therotherhamft.nhs.uk

We value your comments

If you have any comments or concerns about the care we have provided please let us know, or alternatively you can write to:

Patient Services

The Rotherham NHS Foundation Trust

Rotherham Hospital

Moorgate Road

Oakwood

Rotherham

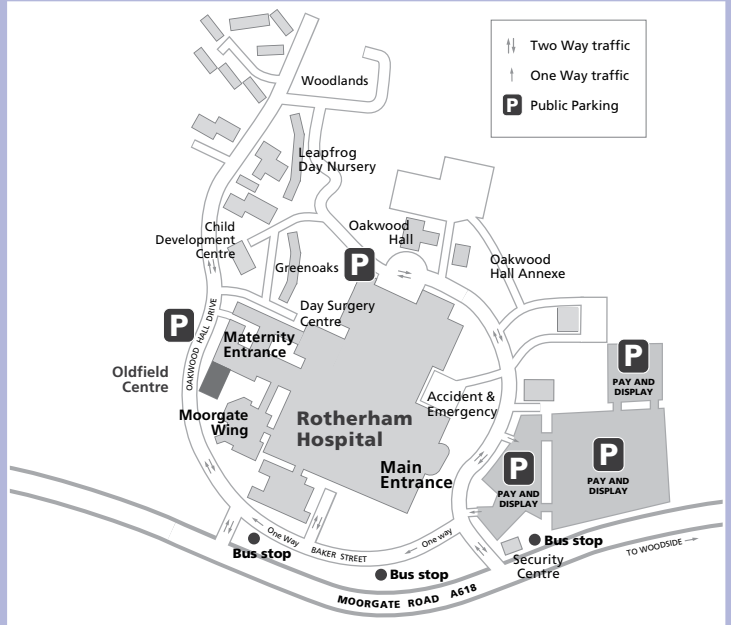
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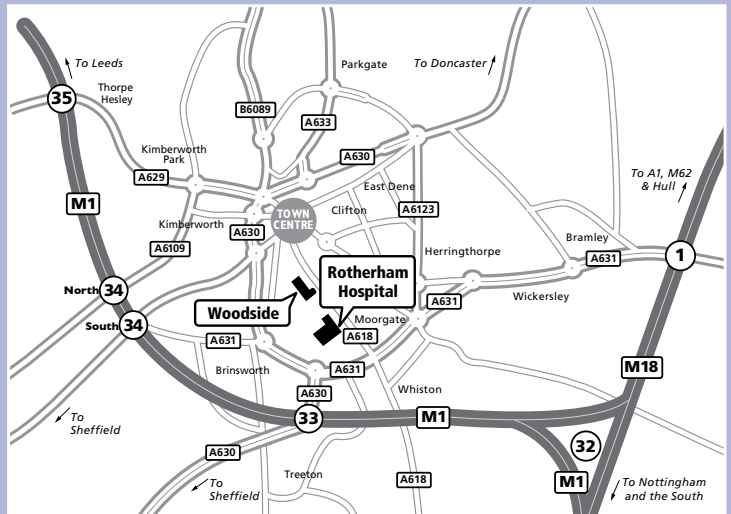
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