

FETAL MONITORING

Monitoring Your Baby's Heartbeat During Labor

What is Fetal Monitoring?

Fetal monitoring is when trained health care providers use tools to check your baby's heartbeat during labor and birth. This information can help determine baby's wellbeing. There are two main ways to monitor baby's heartbeat:

- Continuous Monitoring
- Intermittent Auscultation



What is Continuous Monitoring?

Continuous monitoring is when your baby's heartbeat is listened to continuously during labor and birth. This can occur using an external monitor or an internal monitor. *External monitoring* usually involves two plastic discs which are placed on your belly. One is used to check baby's heartbeat, while the other monitors your contractions. *Internal monitoring* involves attaching a small wire to baby's scalp and can only be done after your water is broken. Contractions can also be monitored internally by placing a small plastic tube in your uterus, which measures how strong your contractions are and how often you are having them.

With continuous monitoring, baby's heartbeat and your contractions are displayed on a computer screen and are printed on special graph paper.

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What is Intermittent Auscultation?

Intermittent auscultation is when your baby's heartbeat is listened to at regular time intervals during labor. This can be done with either a hand-held Doppler device or by putting the plastic disc on your abdomen for a

short time. As you get closer to birth, your health care team will listen to your baby's heartbeat more often. Using a hand-



held device can be more comfortable for the birthing person and allow for more personal space. It can also be used in many different laboring positions, including underwater.

What is the evidence on Fetal Monitoring?

There is no evidence that continuous monitoring leads to better long term clinical outcomes than intermittent auscultation for low-risk pregnancies. The two methods have been compared in many studies. A review of these studies found that:

- There was no difference between the groups in Apgar scores.
 These scores show if your baby is adjusting to birth and life on its own.
- There was no difference in the risk of cerebral palsy, admission to a newborn intensive care unit, or death.
- Newborns who were continuously monitored had fewer seizures. However, this type of seizure does not appear to be harmful to babies.
- Individuals who are continuously monitored are more likely to have a Cesarean birth.
- Individuals who are continuously monitored are more likely to have a forceps or vacuum assisted vaginal delivery.

PROS & CONS

Intermittent Auscultation

- Supports movement and upright positions during labor
- Can be used during water therapy (in a tub or shower)
- Leads to more continuous support from providers during birth

Continuous Monitoring

 Some monitors are wireless and water-resistant

Intermittent Auscultation

- May not be appropriate for people with complications
- There is no automatic recording of the fetal heart rate readings

Continuous Monitoring

- Most monitors require you to be restricted to bed
- The monitor may be uncomfortable and distracting
- Nurses may spend more time focused on the monitor and this may distract from you

What happens if my provider has concerns about the baby's heartbeat?

If you choose intermittent auscultation and concerns arise, your provider can switch to continuous monitoring. If the external monitor (plastics disc) is being used, your provider may recommend internal monitoring. Sometimes, simply changing your body's position or getting extra IV fluids can help improve baby's heartbeat. If these do not help, your provider may recommend additional steps.

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When is Continuous Monitoring needed?

Continuous monitoring may be recommended if:

- You have pre-pregnancy or gestational diabetes
- You have high blood pressure before or during pregnancy
- You have an epidural to help with your labor pain
- You are getting medicine to start or speed up labor, such as Pitocin
- Your amniotic fluid contains meconium (baby poop)
- You develop a fever or more than normal bleeding from your vagina during labor
- Your baby's heartbeat shows signs of needing more oxygen or more time between contractions

REFERENCES



