

FETAL MOVEMENTS

INTRODUCTION

Women who report reduced fetal movements (RFM) in pregnancy are more likely to experience adverse outcomes such as fetal growth restriction, preterm birth and antepartum stillbirth.¹

Fetal movement counting is the only method which can be used by the mother without the need for a clinician or equipment. Maternal monitoring of fetal movement is a means of screening fetal status. Early recognition of reduced fetal movements makes it possible for the clinician to intervene, in order to prevent further compromise and progression to fetal or neonatal death.

Recommendations in this guideline are taken from the Australian and New Zealand Stillbirth Alliance Clinical Practice Guideline for the management of women who report RFM.

DEFINITION

There is no consensus regarding the definition of RFM. The level of movements that reliably distinguishes a healthy fetus from a fetus at risk has not been determined. This is due to wide biological variation in normal movement among healthy fetuses, as well as the wide variation in maternal perception of fetal activity.

OBJECTIVES

The purpose of this guideline is to assist clinicians in providing consistent best practice management for women with singleton pregnancies who report or are concerned about RFM in the third trimester of pregnancy.

ROUTINE ANTENATAL CARE

- All pregnant women should be provided with information regarding normal fetal movements at every routine antenatal visit.
- Information on fetal movements should include a description of the changing patterns of movement as the fetus develops, normal wake/sleep cycles and factors which may modify the mother's perception of movements such as maternal weight and placental position.
- Written information is available refer '<u>Pregnancy your baby's movements and what they mean</u>' (Ref.6641).
- All women should be advised to contact their LMC if they have any concern about reduced or absent fetal movements and not to wait until the next day to report RFM.

MANAGEMENT WHEN RFM ARE REPORTED

- Maternal concern of RFM overrides any definition based on numbers of fetal movements and women with any concern about RFM should be encouraged to contact their LMC for individualised advice.
- When a woman presents with RFM, assessment should be undertaken as soon as practicable.
- For further management please refer to Appendix 1.
- If maternal concern still remains about RFM after a normal clinical assessment (including a CTG and ultrasound), further management should be individualised.

REFERENCES

- 1. Text Australian and New Zealand Stillbirth Alliance (ANZSA) (2010) Clinical Practice Guideline for the management of women who report decreased fetal movements. Retrieved from http://www.stillbirthalliance.org.au on 4/7/12.
- 2. New Zealand College of Midwives (INC) Consensus Statement Assessment of fetal wellbeing during pregnancy. Feb 2012.

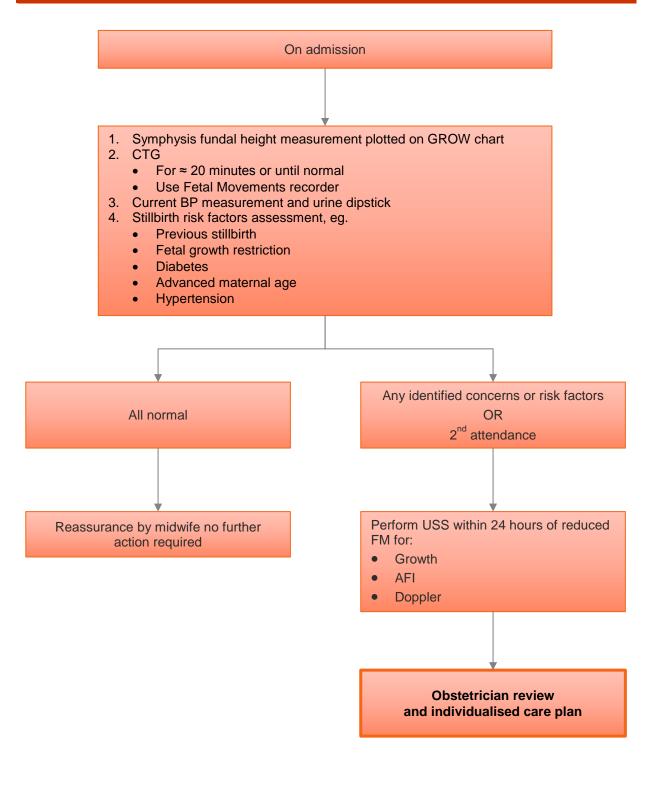
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APPENDIX 1: MANAGEMENT OF REDUCED FETAL MOVEMENTS $\geq 28/40$



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