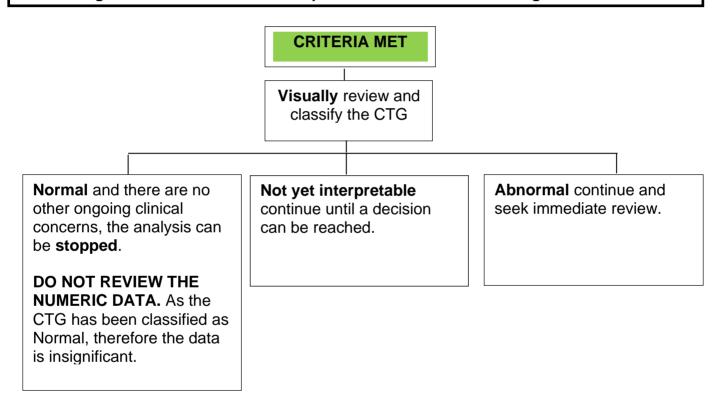


# Antenatal Fetal Monitoring (Computerised Cardiotocograph) - Summary Clinical Guideline

Reference no.: UHDB/AN/F2.1

Computerised CTG should be used for ANTENATAL patients only, it should not be used on patients who are in active labour or suspected of being in active labour.

DO NOT act on the basis of the cCTG alone, this is an AID to pregnancy management, NOT a diagnostic tool. It should Not replace clinical decision making.



Reference no.: UHDB/AN/F2.1

#### CRITERIA NOT MET

## CRITERIA NOT MET BEFORE 60 MINUTES

Unless there are clear **abnormal** features or any other area of concern, **continue** the monitoring until criteria are met.

Analysis is **NOT VALID** if the cCTG has not been analysing for a **full 60 minutes**.

There are many reasons why a trace may not meet the criteria for a while including fetal behavioural state (e.g. sleep state).

## CRITERIA NOT MET AFTER 60 MINUTES

Indicates that normality has not been demonstrated.

In the context of an Antenatal CTG classification, this is an **ABNORMAL** antenatal CTG.

This requires **IMMEDIATE ACTION** including a review by a Senior Obstetrician. The management plan will be based on the reasons for 'Criteria Not Met' (Appendix 1), visual review of monitoring including an assessment of the pregnancy and clinical findings.

**STV** should be taken into account and the trend reviewed if previous analysis has been performed. It can only be analysed with a full 60 minutes of monitoring.

STV has a predictive value for fetuses at risk of metabolic acideamia and IUD.

**STV MUST NOT** be used in isolation as an indicator of the fetal condition.

#### STV Values:

≥ 4 ms	NORMAL
< 4 ms	LOW
< 3 ms	ABNORMAL
< 2 ms	HIGHLY ABNORMAL