

# Indications for Intrapartum Electronic Fetal Monitoring

Table 6.1

## Conditions associated with adverse fetal outcomes where intrapartum EFM may be beneficial

*This list is not exhaustive and should not replace clinical judgement.*

EFM is recommended		EFM should be considered
<b>ANTENATAL CONDITIONS</b>		
<b>Maternal</b>	<ul style="list-style-type: none"> <li>Hypertensive disorders of pregnancy</li> <li>Diabetes: pre-existing and gestational</li> <li>Medical disease (e.g., cardiac, significant anemia, hyperthyroidism, vascular and/or renal disease)</li> <li>Maternal perception of reduced or absent fetal movement</li> <li>Antepartum hemorrhage</li> </ul>	<ul style="list-style-type: none"> <li>Pre-pregnancy BMI &gt;35kg/m<sup>2</sup></li> <li>Other factors (smoking, substance use, limited prenatal care)</li> <li>Advanced maternal age (AMA) (&gt;35 years at time of labour)*</li> </ul>
<b>Fetal</b>	<ul style="list-style-type: none"> <li>Intrauterine growth restriction (IUGR)</li> <li>Abnormal umbilical artery doppler velocimetry</li> <li>Single umbilical artery</li> <li>Oligohydramnios</li> <li>Polyhydramnios</li> <li>Abnormal BPP or NST</li> <li>Significant fetal abnormality (compatible with life)</li> <li>Iso-immunization</li> <li>Multiple pregnancy</li> <li>Velamentous cord insertion</li> </ul>	<ul style="list-style-type: none"> <li>3 or more nuchal loops</li> </ul>
<b>INTRAPARTUM CONDITIONS</b>		
<b>Maternal</b>	<ul style="list-style-type: none"> <li>Vaginal bleeding in labour</li> <li>Intrauterine infection/chorioamnionitis</li> <li>Previous CS/trial of labour after CS</li> <li>Prolonged rupture of membranes at term (&gt;24 hours)</li> <li>Combined spinal-epidural analgesia</li> <li>Oxytocin induction or augmentation of labour</li> <li>Post term pregnancy (&gt;42 weeks gestation)</li> <li>Labour dystocia</li> <li>Tachysystole</li> <li>Difficulties in reliably determining UA and/or FHR with IA</li> </ul>	
<b>Fetal</b>	<ul style="list-style-type: none"> <li>Abnormal FHS (FHR and UA) via IA</li> <li>Prematurity (&lt;37 weeks gestation)</li> <li>Meconium staining of the amniotic fluid</li> <li>Breech presentation</li> <li>FHR arrhythmia</li> </ul>	

BMI = Body mass index; BPP = Biophysical profile; CS = Cesarean section; EFM = Electronic fetal monitoring; FHR = Fetal heart rate; IA = Intermittent auscultation; NST = Non-stress test; ROM = Rupture of membranes; UA = Uterine activity

\*Note: AMA is not included in the 2020 SOGC Guideline, but was included in the 2020 Advances in Labour and Risk

Adapted from the Society of Obstetricians and Gynecologists of Canada's "No. 396-Fetal Health Surveillance: Intrapartum Consensus Guideline" by Dore & Ehman (2020), Journal of Obstetrics and Gynecology Canada, 42(3), Table 3, p. 325. Copyright 2020. Published by Elsevier Inc. All rights reserved.