

**OLIVE VIEW-UCLA MEDICAL CENTER
FETAL ASSESSMENT CENTER
POLICY & PROCEDURE**

NUMBER: 4906

VERSION: 2

SUBJECT/TITLE: FETAL MOVEMENT PROTOCOL

MD ORDER: YES [] NO [X]

POLICY:

PURPOSE: To define the purpose of the fetal movement test and the nursing responsibilities.

DEPARTMENTS: Nursing 3D- Fetal Assessment, OB/GYN

DEFINITIONS:

PROCEDURE: OVERVIEW

The fetal movement test is designed to identify a fetus at risk for intrauterine demise. The fetus decreases or stops moving in response to chronic or acute hypoxia.

- A. Teach the patient the importance of fetal movement. Instruct her to perform the counts at a time when she is relaxed, able to concentrate and when the fetus is active.
- B. Instruct the patient to get comfortable or lie on their side and note the time when the fetus first moves. She can stop counting after 10 movements have occurred. She should record the time she starts and stops counting.
- C. The antepartum patient is given fetal Kick Count educational instructions upon discharge and instructed to maintain a log of the fetal movements. This log should be brought to all subsequent visits.
- D. Instruct her to present to OB Triage if she feels less than 10 movements in two hours, if the fetus moves much less than the days before, or if the fetus has not moved all day.

MANAGEMENT

If decreased or no fetal movement is reported, evaluate fetal status with an NST or AFI immediately and manage according to results.

Since depressant drugs, alcohol, or smoking can reduce fetal movements, evaluate appropriately.

Cycles of fetal movement occur multiple times daily. The healthy fetus moves

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Page Number: 2

10 or more times in a two-hour period. At or near term, the mother may perceive a decrease in fetal movement.

References: PAC-LAC Prenatal and Intrapartum Protocols	
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