

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

**NUMBER: 4947
VERSION: 2**

SUBJECT/TITLE: FETAL ACOUSTIC STIMULATION TEST- “F.A.S.T.”

MD ORDER: YES [X] NO []

POLICY: A Fetal Acoustic Stimulation Test (FAST) is used to stimulate a response of fetal accelerations during a non-reactive, non-stress test. Fetal acoustic stimulation is an accepted clinical practice as an adjunct to antepartum and intrapartum assessment of fetal well-being.

PURPOSE: To outline the purpose and procedure for obtaining a fetal acoustic stimulation test.

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

DEFINITIONS: The goal of antepartum surveillance is to prevent fetal death or injury caused by antepartum interruption of fetal oxygenation. The non-stress test (NST) is based upon the assumption that a characteristic fetal heart rate acceleration of 15 beats per minute above the baseline for at least 15 seconds reflects a non-acidotic, non-neurologically depressed fetus. If the NST is non-reactive, then a Fetal Acoustic Stimulation Test (FAST) can be conducted. The FAST is an adjunct to antepartum and intrapartum assessment of fetal well-being. This test is done in conjunction with antepartum non-stress testing and with intrapartum external-internal electronic fetal heart rate monitoring.

EQUIPMENT LIST: Fetal acoustic stimulator or Artificial Larynx.

PROCEDURE:

1. Obtain a non-stress test for a period of 20 minutes in order to establish a baseline fetal heart rate as well as to evaluate the presence of accelerations.
2. If NST is reactive, then FAST is not necessary. If non-reactive, then proceed with FAST.
3. Explain procedure to patient. Demonstrating the sound of instrument.
4. Place the instrument on the maternal abdomen in the approximate area of the fetal head.

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5. Activate the device for 1-2 seconds.
6. If no acceleration occurs or if the qualifying criteria of an increase of 15 beats per minute times 15 seconds is not met, repeat the sound stimulus.
Alternatively, the stimulus can be repeated three times at 1-5 minute intervals increasing the time of stimulus up to three seconds.
7. After the last sound stimulus, continue monitoring the patient for 40 minutes to obtain a qualifying acceleration unless there are contraindications to do so.
8. If no reaction, then further fetal evaluation may be indicated. (i.e., BPP, CST)

DOCUMENTATION:

Place a complete descriptive note in the patient’s electronic medical record.

*NOTE: This procedure is accepted clinical practice and does not require separate written or oral consent from the patient.

References: Miller, David, Mendelson, Sheri Garber. Antepartum testing; (5:49) Special testing and procedures. PAC-LAC Guidelines of care. 2015.	
Approved by: Jan Love (Clinical Nurse Director II)	Date: 03/08/2017
Review Date: 03/08/2020	Revision Date:
Distribution: Nursing 3D- Fetal Assessment, OB/GYN	
Original Date: 03/08/2017	