NTSV Algorithm

1. Significant Decelerations are defined as:

- Variable decelerations lasting >60 seconds with nadir more than 60BPM below baseline
- Variable decelerations lasting >60 seconds with nadir below 60BPM, regardless of baseline
- Any late decelerations
- 2. Intrauterine Resuscitation includes measures to improve utero-placental perfusion and maternal/fetal oxygenation. This may consist of:
 - Repositioning the patient
 - Administration of supplemental oxygen if maternal saturation is <95%
 - Administration of IV fluid bolus
 - Reduce oxytocin by half if tachysystole and Category I pattern
 - Discontinue oxytocin if tachysystole and persistent Category II pattern
 - Consider administration of tocolytic (Terbutaline)
 - Consider alpha-adrenergic agonist (phenylephrine) if recent epidural and change in vital signs
 - Consider amnio-infusion for severe variable decelerations

3. Normal Labor Progress is:

- In the active first stage of labor (≥6cm dilation) dilation of ≥1cm/h
- In the second stage of labor (pushing) as progressive fetal descent. Advise to limit second stage to 1.5 hours in setting of Category II FHR tracing with moderate variability and significant decelerations
- Criteria for Operative Vaginal Birth include:
 - Fetal station at +2 or lower and identification of fetal position
 - Adequate maternal pelvis for estimated fetal size
 - Adequate maternal analgesia
 - Emptied maternal bladder
 - Informed consent
 - Availability of immediate Cesarean birth if OVB attempt fails

Notes on use of the algorithm:

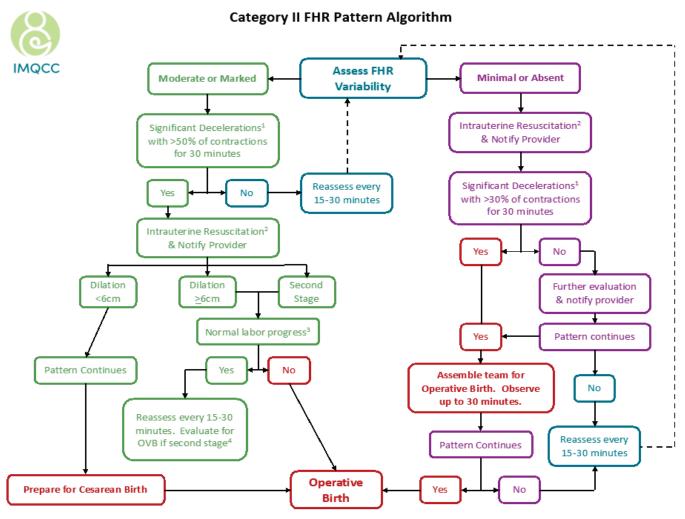
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- The FHR pattern is to be assessed over a 30-minute time period within this algorithm when making care decisions
 - The algorithm is intended to guide care for late preterm or term infants (>34 weeks)
- If at any time the tracing reverts to Category I or III pattern, then abandon the algorithm
- Clinicians may abandon the algorithm if their clinical judgement is that further interventions are necessary

Adapted from: Shields LE, Wiesner S, Klein C, Pelletreau B, Hedriana HL. A Standardized Approach for Category II Fetal Heart Rate with Significant Decelerations: Maternal and Neonatal Outcomes. Am J Perinatol. 2018;35(14):1405-1410. doi:10.1055/s-0038-1660459



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