Date: 11/15/01njm

Auscultative monitoring is an acceptable monitoring method in low risk pregnancies. In fact, though continuous electronic fetal monitoring (CEFM) is more widely used in the US, there is very little data to recommend use of CEFM in most laboring patients. I will briefly review the referenced materials below.

1.) Cochrane Library

Thacker SB, Stroup D, Chang M. Continuous electronic heart rate monitoring for fetal assessment during labor (Cochrane Review). In: *The Cochrane Library,* Issue 4, 2001. Oxford: Update Software.

Reviewers' conclusions: The only clinically significant benefit from the use of routine continuous EFM was in the reduction of neonatal seizures. In view of the increase in cesarean and operative vaginal delivery, the long-term benefit of this reduction must be evaluated in the decision reached jointly by the pregnant woman and her clinician to use continuous EFM or intermittent auscultation during labor.

Hodnett ED. Home-like versus conventional institutional settings for birth (Cochrane Review). In: *The Cochrane Library,* Issue 4, 2001. Oxford: Update Software.

Reviewers' conclusions: There appear to be some benefits from home-like settings for childbirth, although increased support from caregivers may be more important. Caregivers and clients in home-like settings need to watch for signs of complications.

2.) Advanced Life Support in Obstetrics (ALSO)

Category C

Auscultative monitoring is an acceptable monitoring method in low risk pregnancies

Category A

The only clinically significant benefit from the use of routine CEFM is in the reduction of neonatal seizures. The long term benefits of this finding need to be evaluated. The decision to use intermittent auscultation versus CEFM should be made jointly by the patient and her provider.

Advanced Life Support in Obstetrics Course Syllabus. Intrapartum fetal surveillance, Section E pages 1-21. American Academy of Family Physicians. Leawood, Kansas. 2000

3. Randomized controlled trial 1994

Mahomed K, Nyoni R, Mulambo T, Kasule J, Jacobus E. Randomised controlled trial of intrapartum fetal heart rate monitoring. BMJ 1994;308:497-500.

Conclusion:

Abnormalities in fetal heart rate detected by Doppler Ultrasound resulted in good perinatal outcomes.