## FETAL HEART RATE DECISION TREE (DRAFT) **CATEGORY I CATEGORY II CATEGORY III** (NORMAL) (INDETERMINATE) (ABNORMAL) Baseline - 110 to 160bpm All FHR patterns not in Category I or III Sinusoidal FHR Moderate Variability (6-25bpm) OR Absence of late or variable Absent Variability with: Re-current Late Evaluation and surveillance decelerations Decelerations Early decelerations or accelerations OR may be present or absent Absent Variability with Re-current Variables OR FHR accelerations Absent FHR accelerations and Bradvcardia OR Absent/minimal FHR variability Moderate FHR variability Continue OR **REVIEW WITH CHARGE RN** current plan of Absent FHR accelerations and Re-current decelerations care Perform OR Change maternal position **REQUIRES IMMEDIATE ATTENTION - Perform** Prolonged deceleration 2-10 minutes Bolus IVF D/C Oxytocin (cervidil) Treat tachysystole using Change maternal position Tachysystole Tree Bolus IVF Perform Check BP\* Treat tachysystole using tachysystole tree D/C Oxytocin (cervidil) Check BP \* Change maternal position Initiate Huddle with provider, in house Bolus IVF attending (if applicable), RN, Charge Nurse, Treat tachysystole using tachysystole tree After 30 minutes did Category II Resident (if applicable) Notify anesthesia & Yes Check BP\* FHR pattern resolve? **OR** team Did Category III FHR pattern resolve? **REVIEW WITH CHARGE RN** After 30 minutes did Category II **Notify Provider-Document Plan** Yes FHR pattern resolve? No Yes Continue current No After 30 minutes did Category II plan of care. Yes FHR pattern resolve? Observe for **NOTIFY PROVIDER Contact Provider** Initiate Huddle with provider, in 30 minutes. **EXPECT PROVIDER AT** Oxytocin may be house attending (if applicable). Notify BEDSIDE restarted Resident if applicable, Charge RN Provider to INITIATE CHAIN OF No Review previous 4 hours of FHR develop **COMMAND IF Document Plan of Care** plan of care **PROVIDER DOES NOT** Consider huddle with provider, in house attending (if **COME TO THE** applicable), RN, Charge RN, Resident if applicable and BEDSIDE After 30 minutes did Category II consider turning off Pitocin Yes FHR pattern resolve? Document Plan of Care Continue to observe for: -Absent FHR accelerations and Absent/minimal FHR $\ensuremath{^{\bigstar}}$ If mean arterial pressure has dropped greater than No variability or equal to 20% from baseline, notify provider/ anesthesia to consider treating blood pressure