



## **Chapter 9**

### **FETAL MOVEMENT COUNTS**

The mother first recognizes fetal movement at 16 – 20 weeks gestation. The fetus that is felt to move by the mother is most often healthy. (Contrarily, a sudden decrease in fetal movement is an ominous sign of loss of fetal well being). Fetal movement is defined as any fetal activity perceived by the mother. On ultrasound examination, fetal activity can be divided into fetal body movements, fetal breathing activity, hiccups and other.

Fetal movement is episodic and is associated with fetal rest and activity cycles. These cycles become established in the last 8 – 10 weeks of gestation and are of longer duration as gestational age advances.

Counts of fetal activity, as perceived by mother, are an inexpensive and simple screening tool that allows the mother to actively participate in the antepartum monitoring of fetal well being.

### **Management**

1. Daily monitoring of fetal movements should start at 26-32 weeks in all pregnancies with risk factors for adverse perinatal outcome.
2. Healthy pregnant women without risk factors for adverse perinatal outcome should be made aware of the significance of fetal movements in the 3<sup>rd</sup> trimester and asked to perform a fetal movement count if they perceive decreased movements.
3. Instruct the woman to lie on her left side in a quiet area. Write down the time of day and count 6 movements. Write down the time when fetal movement count was initiated and when it was stopped.
4. If no movements are felt, continue monitoring for fetal movement until a 2-hour-period has elapsed.
5. If, at the end of two hours, 6 movements have not been appreciated, the woman should consult her physician or midwife **without delay and/or go to the birthing area directly**, so that further assessment of fetal health using non-stress testing, and possibly for ultrasound for biophysical profile, can be employed.

