## Pregnancy - Decreased or Abnormal Fetal Movement



Office Hours Telehealth Triage Protocols | Adult | 2022

## DEFINITION

- Concerns that the baby is moving less, moving too much, or not moving at all
- Concerns about an abnormal kick count (less than 5 in one hour or less than 10 in 2 hours)
- Concerns and questions about fetal movement
- Questions about how to perform a kick count

#### Note:

• Pregnant and patient is not in labor

## TRIAGE ASSESSMENT QUESTIONS

## Call EMS 911 Now

Sounds like a life-threatening emergency to the triager

## See More Appropriate Protocol

Pregnant 20 or more weeks and having abdominal pain

Go to Protocol: Pregnancy - Abdominal Pain Greater Than 20 Weeks EGA (Adult)

Pregnant 20 or more weeks and having vaginal bleeding or spotting

Go to Protocol: Pregnancy - Vaginal Bleeding Greater Than 20 Weeks EGA (Adult)

Pregnant 37 or more weeks (i.e., term) and having contractions or other symptoms of labor Go to Protocol: Pregnancy - Labor (Adult)

Pregnant < 37 weeks (i.e., preterm) and having contractions or other symptoms of labor Go to Protocol: Pregnancy - Labor - Preterm (Adult)

#### Injury to abdomen

Go to Protocol: Pregnancy - Abdomen Injury (Adult)

## Go to L&D Now

Severe headache and not relieved with acetaminophen (e.g., Tylenol)

## R/O: preeclampsia

New blurred vision or visual change

R/O: preeclampsia

Leakage of fluid from vagina

*R/O: rupture of membranes* 

## Go to L&D Now (or to Office with PCP Approval)

Office Hours Telehealth Triage Protocols | Adult | 2022 Pregnancy - Decreased or Abnormal Fetal Movement Pregnant 23 or more weeks and no movement of baby > 2 hours (Exception: Mother was distracted by other activities.)

Reason: Needs exam and fetal monitoring.

Pregnant 23 or more weeks and baby moving less today by kick count (e.g., kick count < 5 in 1 hour or < 10 in 2 hours)

Reason: Needs exam and fetal monitoring.

Pregnant 23 or more weeks and mother thinks baby is moving less today (e.g., even if kick count is normal or not performed) (Exception: Mother was distracted by other activities.)

Reason: Needs exam and fetal monitoring.

Pregnant 23 or more weeks and baby moving less today AND unable (or unwilling) to perform kick count

Reason: Needs exam and fetal monitoring.

Fever >  $100.4^{\circ}$  F ( $38.0^{\circ}$  C)

R/O: chorioamnionitis, pyelonephritis, viral illness

New hand or face swelling

R/O: preeclampsia

Being seen by a specialist for a high-risk pregnancy condition (e.g., cord or placenta abnormalities, gestation 41 or more weeks, oligohydramnios or polyhydramnios, preeclampsia, twins)

Patient sounds very sick or weak to the triager

Reason: Severe acute illness or serious complication suspected.

#### Callback by PCP within 1 Hour

Pregnant 23 or more weeks and increased fetal movement (extra wiggly) and mother thinks there is something wrong

Note: Usually, increased fetal activity is considered a positive sign of fetal well-being. Talking with the PCP may help reassure an anxious mother who has very rapid fetal movements.

Hand itching, foot itching, or widespread itching

R/O: Intrahepatic Cholestasis of Pregnancy (ICP)

#### See in Office Today

Pregnant 20 to 22 weeks and has felt baby move previously, and no movement of baby > 8 hours

Reason: Needs exam and fetal monitoring.

Pain or burning with passing urine (urination)

R/O: UTI, cystitis

Patient wants to be seen

#### See in Office Within 3 Days

Pregnant 20 to 22 weeks and has not felt baby move yet

Reason: Needs exam to determine EGA.

## **Home Care**

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Reason: Mother reports normal fetal movement.

Pregnant 23 or more weeks and baby moving less today AND willing to perform kick count *R/O: normal variability of baby movement, mother may have been distracted by other activities* 

Pregnant 20 to 22 weeks and has felt baby move in past 8 hours

Pregnant < 20 weeks and has not felt baby move yet

Reason: Too early in pregnancy, incorrect EGA.

Fetal hiccups, questions about

## HOME CARE ADVICE

#### Pregnant 23 or More Weeks and Baby Moving Normally

1. Reassurance and Education - Normal Fetal Movement and Kick Count:

• Given what you have told me, it sounds like you do not need to go to Labor and Delivery at the hospital right now.

• But, I want to make certain that you are comfortable with this and to answer any questions that you have.

• Some women report that the baby's movements may feel different from one pregnancy to the next. Depending on the position of the baby or placenta it may be harder to feel movement.

• Here is some care advice that should help.

#### 2. Fetal Movement and Pregnancy Dates:

- 1-15 Weeks: Baby is too small for mother to feel the baby move.
- 16-18 Weeks: Some women begin to feel the baby move, especially if they had a baby before.
- 18-20 Weeks: Many women begin to feel baby move around this time.
- 20-23 Weeks: Most women begin to feel baby move around this time.
- 24 Weeks: All women should feel the baby move by this time.
- Over 28 Weeks: Some doctors advise that women check kick counts each day.

#### 3. Kick Count Instructions:

• Most women will be able to feel the baby move by the 18 to 20th week of pregnancy. All women should feel the baby move by the 24th week of pregnancy. *Here are kick count instructions*.

• Pick the time of the day that your baby is most active.

• If you have not eaten much today, eating a snack or drinking some juice can make the baby more active.

• Sit back in a comfortable chair or lie down on your left side in bed. Do this in a quiet room (no TV, cell phone, computer, or children).

- Count any baby movement (kicks, rolls, flutters). Count up to 10.
- Normal Kick Count: 5 or more in one hour or 10 or more in 2 hours.

• Low Kick Count: Less than 5 in one hour or less than 10 in 2 hours. Talk with your doctor (or NP/PA) right away, or go in to L&D and have the baby checked.

#### 4. Call Back If:

- Low kick count (under 5 in 1 hour or under 10 in 2 hours)
- Normal kick count but you still are worried that something is wrong
- You have other questions or concerns.

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# Pregnant 23 Weeks or More Weeks and Baby Moving Less and Willing to Perform Kick Count

#### 1. Reassurance and Education - Baby Moving Less Today:

• Given what you have told me, it sounds like you do not need to go to Labor and Delivery at the hospital right now.

• But, I want to make certain that you are comfortable with this and give you instructions on performing a kick count.

Some women report that the baby's movements may feel different from one pregnancy to the next. Depending on the position of the baby or placenta it may be harder to feel movement.
Here is some care advice that should help.

#### 2. Kick Count Instructions:

• Most women will be able to feel the baby move by the 18 to 20th week of pregnancy. All women should feel the baby move by the 24th week of pregnancy. *Here are kick count instructions*.

• Pick the time of the day that your baby is most active.

• If you have not eaten much today, eating a snack or drinking some juice can make the baby more active.

• Sit back in a comfortable chair or lie down on your left side in bed. Do this in a quiet room (no TV, cell phone, computer, or children).

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#### **Fetal Hiccups**

#### 1. Fetal Hiccups:

• Fetal hiccups are common. Women usually first feel them in the second trimester. They become even more noticeable in the last trimester of pregnancy.

• *What does it feel like?* Women use terms like "tapping" or a "regular beating" or just plain "baby hiccups".

• Are they normal? While they may feel strange, they are normal and harmless. There is no reason for concern. Some doctors tell their patients that this is the baby "practicing breathing and swallowing".

#### 2. Kick Count Instructions:

• Most women will be able to feel the baby move by the 18 to 20th week of pregnancy. All women should feel the baby move by the 24th week of pregnancy. *Here are kick count* 

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instructions.

• Pick the time of the day that your baby is most active.

• If you have not eaten much today, eating a snack or drinking some juice can make the baby more active.

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## **FIRST AID**

N/A

## **BACKGROUND INFORMATION**

#### **Key Points**

• Quickening is the term used to describe when a woman first feels baby movement. This usually occurs between the 18th-20th weeks of pregnancy. Women who have been pregnant previously can sometimes feel the baby move as early as the 16th or 17th week. Thin women feel movements earlier in pregnancy than overweight women.

• Women use many different terms to describe their babies' movements. Early in pregnancy women may describe a "fluttering", a "nudge", a "butterfly", or a slight "twitch". Later in pregnancy the baby is larger and the movements are more forceful. Women may then describe "hard kicking", "punching", or "rolling".

• Feeling the baby move is a great source of happiness for the mother to be. The fetal movements provide ongoing reassurance that all is going well with the pregnancy. A decrease or absence of fetal movement can cause significant maternal anxiety regarding the well-being of her baby, and may be a sign of fetal compromise.

#### **Fetal Hiccups**

• Fetal hiccups are common. Women usually first feel them in the second trimester. They become even more noticeable in the last trimester of pregnancy.

• *What does it feel like*? Women use terms like "tapping" or a "regular beating" or just plain "baby hiccups".

• *Are they normal?* While they may feel strange, they are normal and harmless. There is no reason for concern. Some doctors tell their patients that this is the baby "practicing breathing and swallowing".

#### **Fetal Movement Dates**

- 1-15 Weeks: Baby is too small for mother to feel the baby move.
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- 18-20 Weeks: Many women begin to feel baby move around this time.
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- 24 Weeks: All women should feel the baby move by this time.
- Over 28 Weeks: Some doctors advise that women check kick counts each day.

#### Performing Kick Counts

- Performing a daily "kick count" or using a "kick chart" is one way to track your baby's movement.
- Some doctors recommend kick counts and some doctors do not.

• In some cases (such as a high risk pregnancy), it may be more important to perform daily kick counts.

• Research has shown that performing kick counts does not reduce stillbirths [Grant reference].

#### **Kick Count Instructions**

- Pick the time of the day that your baby is most active.
- If you have not eaten much today, eating a snack or drinking some juice can make the baby more active.
- Sit back in a comfortable chair or lie down on your left side in bed. Do this in a quiet room (no TV, cell phone, computer, or children).
- Count any baby movement (kicks, rolls, flutters). Count up to 10.
- Normal Kick Count: 5 or more in one hour or 10 or more in 2 hours.
- Low Kick Count: Less than 5 in one hour or less than 10 in 2 hours.

#### **Increased Fetal Movement**

Sometimes women will report that the baby is moving more or is "extra wiggly". Most often increased fetal activity is a positive sign of fetal well-being.

- Many women report that their babies are most active at night.
- Others note that the baby's movements increase after meals or in response to a stressful situation.
- Babies have regular periods during a day when their movements increase.
- Too much caffeine or sugar can possibly cause a baby to move more.

Rarely, increased fetal movement can be a sign of fetal distress (hypoxia). Typically, in such a circumstance, the increased movement is followed by decreased fetal movement (e.g., a low kick count). For an anxious mother, the simplest and safest thing to do is to refer her in to L&D for fetal monitoring or arrange a call with her PCP.

## Calculating the Estimated Date of Delivery (EDD)

• EDB (estimated date of birth) and EDC (estimated date of confinement) mean the same thing as EDD.

- LNMP is the last normal menstrual period.
- *Nagele's rule:* EDD = (LNMP 3 months) + 7 days.

#### Calculating the Estimated Gestational Age (EGA)

- Gestational age is the number of weeks since the LNMP.
- A normal full-term pregnancy lasts 37-42 weeks.

• Wheel: Generally, the wheel is the best method for the triager to calculate the gestational age. The patient must be able to give you a relatively accurate LNMP. A wheel and a calculator are available

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on the internet at <u>www.medcalc.com</u>.

• **Ultrasound**: An ultrasound during early pregnancy can be very accurate in setting the EDD, if patient has had one performed and can remember the results.

• **Fundal height**: The top of the uterus can be palpated at the level of the navel at 20 weeks of gestational age.

• Fetal Heart Tones: Can be first heard with a doppler stethoscope at 10-12 weeks gestational age.

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