Pregnancy - Decreased Fetal Movement
Adult After-Hours Version

- DEFINITION -

* Concerns that the baby is moving less
* Questions relating to fetal movement
* Questions about how to perform a kick count

Note:
* Pregnant and patient is not in labor

- INITIAL ASSESSMENT QUESTIONS -

1. FETAL MOVEMENT: "Has the baby's movement decreased or changed significantly from normal?" (e.g., yes, no; describe)
2. EDD: "What date are you expecting to deliver?"
3. PREGNANCY: "How many weeks pregnant are you?"
4. OTHER SYMPTOMS: "Do you have any other symptoms?" (e.g., abdominal pain, leaking fluid from vagina, vaginal bleeding, etc.)

- BACKGROUND INFORMATION -

GENERAL
* 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 MOVEMENT DATES
* 1-15 weeks: Baby is too small for movements to be felt by mother
* 16-18 weeks: Some women begin to feel baby movement (especially if had prior baby)
* 18-20 weeks: Majority of women begin to feel baby move around this time
* 22 weeks: All women should feel baby move by this time
* 28-32 weeks: Some doctors recommend that women begin daily kick counts

PERFORMING KICK COUNTS
* Performing a daily 'kick count' or using a 'kick chart' is one way to monitor fetal movement.
* Some doctors recommend kick counts and some doctors do not. There may be special circumstances (e.g., high risk pregnancy) in which it may be more important to monitor fetal movement and 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 when the baby is most active.
* Sit back in a comfortable chair or lay down on your side (preferably left) in bed, in a quiet room with no distractions (e.g., radio, TV, cell phone, computer, children).
* Count any baby movements (even small ones). 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.

CALCULATING THE ESTIMATED DATE OF DELIVERY (EDD)
* EDD means the same thing as EDC (estimated date of confinement).
* 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 on the internet at www.medcalc.com.
* 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.

FIRST AID
N/A

REFERENCES


SEARCH WORDS
BABY
BABY MOVEMENT
DECREASED FETAL MOVEMENT
DECREASED MOVEMENT
FETAL MOVEMENT
FETUS
KICK
KICK CHART
KICK COUNT
MOVEMENT
PREGNANCY
PREGNANT
QUICKENING
UTERUS
WOMB

- TRIAGE -

Call EMS 911 Now

Sounds like a life-threatening emergency to the triager

CA:  40,  1

See More Appropriate Guideline

Injury to abdomen

Go to Guideline: Trauma - Abdominal - in Pregnancy (Adult)

[1] Pregnant > 36 weeks AND [2] having contractions or other symptoms of labor

Go to Guideline: Pregnancy - Labor (Adult)
[1] Pregnant < 37 weeks AND [2] having contractions or other symptoms of labor

Go to Guideline: Pregnancy - Labor - Preterm (Adult)


Go to Guideline: Pregnancy - Abdominal Pain GT 20 Weeks EGA (Adult)


Go to Guideline: Pregnancy - Vaginal Bleeding GT 20 Weeks EGA (Adult)

Go to L&D Now

New hand or face swelling

R/O: preeclampsia
CA:   52,  16,  1

Blurred vision or visual change

R/O: preeclampsia
CA:   52,  16,  1

[1] SEVERE headache AND [2] not relieved with acetaminophen (e.g., Tylenol)

R/O: preeclampsia
CA:   52,  16,  1

Leakage of fluid from vagina

R/O: rupture of membranes
CA:   52,  16,  17,  1

Go to L&D Now (or PCP triage)

[1] Pregnant > 24 weeks AND [2] 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
CA:   55,  7,  3,  90,  1


Reason: needs exam and fetal monitoring
CA:   55,  7,  3,  90,  1


Reason: needs exam and fetal monitoring
CA:   55,  7,  3,  90,  1


Reason: needs exam and fetal monitoring
CA:   55,  6,  7,  10,  90,  1
Fever > 100.4 F (38.0 C)
   R/O: chorioamnionitis, pyelonephritis, viral illness
   CA: 55, 76, 80, 1

Patient sounds very sick or weak to the triager
   CA: 55, 80, 1

See Physician within 24 Hours
   Reason: needs exam and fetal monitoring
   CA: 44, 6, 7, 10, 90, 1

Discomfort when passing urine (e.g., pain, burning or stinging)
   R/O: UTI, cystitis
   CA: 44, 13, 14, 7, 3, 15, 1

See PCP When Office is Open (within 3 days)
[1] Pregnant 20 or more weeks AND [2] has not felt baby move yet
   Reason: needs exam to determine dates
   CA: 45, 12, 6, 7, 89, 1

Home Care
[1] Pregnant > 24 weeks AND [2] baby moving normally OR normal kick count (all triage questions negative)
   CA: 48, 5, 7, 3, 4, 1

   CA: 48, 2, 3, 7, 4, 1

[1] Pregnant 22-24 weeks AND [2] has felt baby move in past 24 hours (all triage questions negative)
   CA: 48, 9, 10, 7, 11, 1

[1] Pregnant < 20 weeks AND [2] has not felt baby move yet (all triage questions negative)
   CA: 48, 18, 6, 7, 8, 1
1. CARE ADVICE given per Pregnancy - Decreased Fetal Movement (Adult) guideline.

2. REASSURANCE: 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.

3. KICK COUNT INSTRUCTIONS:
   - Pick the time of the day that the baby is most active.
   - Sit back in a comfortable chair or lay down on your side (preferably left) in bed, in a quiet room with no distractions (e.g., radio, TV, cell phone, computer, children).
   - Count any baby movements (even small ones). 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 < 10 in 2 hours.

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

5. REASSURANCE: 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.

6. QUICKENING:
   - Quickening is the term used to describe when a woman first feels baby movement.
   - This usually occurs between the 18th-20th weeks of pregnancy.
   - 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".

7. FETAL MOVEMENT and PREGNANCY DATES:
   - 1-15 weeks - Baby is too small for movements to be felt by mother
   - 16-18 weeks - Some women begin to feel baby movement (especially if had prior baby)
   - 18-20 weeks - Majority of women begin to feel baby move around this time
   - 22 weeks - All women should feel baby move by this time
   - 28-32 weeks - Some doctors recommend that women begin daily kick counts

8. CALL BACK IF:
   - No baby movement felt by 20 weeks (or see your physician)
   - You have any other questions or concerns.

9. REASSURANCE: Given what you have told me, it sounds like you do not need to be worried. This early in pregnancy some women may not feel their babies move at all for many hours.
10. FETAL MOVEMENT
   DECREASED: During the day when you are most active the baby is often the most quiet. Perhaps the baby is rocked to sleep by the rhythmic motion of your walking and activity.
   INCREASED: 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.

11. CALL BACK IF:
   - No baby movement felt for more than 24 hours
   - You have any other questions or concerns.

12. REASSURANCE: This may not be serious. Some women do not feel their babies move until after 20 weeks. Some women find that their pregnancy dates were wrong. But, it is time for you to see a physician and get an examination.

13. FLUIDS: Drink extra fluids. Drink 8-10 glasses of liquids a day. (Reason: to produce a dilute, non-irritating urine.)

14. CRANBERRY JUICE: Drinking cranberry juice may help in fighting urinary tract infections. Do not exceed 12 oz (Reason: too much cranberry juice can also be irritating to the bladder).

15. CALL BACK IF:
   - Abdominal pain or fever >100.4 F (38.0 C) occurs
   - Any vaginal bleeding or spotting occurs
   - Low kick count (if pregnant > 24 weeks)
   - You become worse.

16. DRIVING: Another adult should drive. If immediate transportation is not available via car or taxi, then the patient should be instructed to call EMS-911.

17. LEAKAGE: Place menstrual pad in underwear. Bring towel; you may wish to put it on the seat of your car.

18. REASSURANCE: Given what you have told me, it sounds like you do not need to be worried. Many women do not feel their babies move until after 20 weeks.

40. CALL EMS 911 NOW: Immediate medical attention is needed. You need to hang up and call 911 (or an ambulance). (Triager Discretion: I'll call you back in a few minutes to be sure you were able to reach them.)

41. GO TO ED NOW: You need to be seen in the Emergency Department. Go to the ER at __________ Hospital. Leave now. Drive carefully.

42. GO TO ED NOW (or PCP triage):
   - IF NO PCP TRIAGE: You need to be seen. Go to the ER/UCC at __________ Hospital within the next hour. Leave as soon as you can.
   - IF PCP TRIAGE REQUIRED: You may need to be seen. Your doctor will want to talk with you to decide what's best. I'll page him now. If you haven't heard from the on-call doctor within 30 minutes, go directly to the ER/UCC at __________ Hospital.
43. SEE PHYSICIAN WITHIN 4 HOURS (or PCP triage):
   - IF NO PCP TRIAGE: You need to be seen. Go to ______________ (ED/UCC or office if it will be open) within the next 3 or 4 hours. Go sooner if you become worse.
   - IF PCP TRIAGE REQUIRED: You may need to be seen. Your doctor will want to talk with you to decide what's best. I'll page the doctor now. If you haven't heard from the on-call doctor within 30 minutes, call again. (Note: If PCP can’t be reached, send to ED/UCC or office.)

44. SEE PHYSICIAN WITHIN 24 HOURS:
   - IF OFFICE WILL BE OPEN: You need to be examined within the next 24 hours. Call your doctor when the office opens, and make an appointment.
   - IF OFFICE WILL BE CLOSED AND NO PCP TRIAGE: You need to be examined within the next 24 hours. Go to __________ at your convenience.
   - IF OFFICE WILL BE CLOSED AND PCP TRIAGE REQUIRED: You may need to be seen within the next 24 hours. Your doctor will want to talk with you to decide what's best. I'll page the doctor now. (EXCEPTION: from 10 pm to 7 am. Since this isn’t serious, we'll hold the page until morning.)

45. SEE PCP WITHIN 3 DAYS: You need to be examined within 2 or 3 days. Call your doctor during regular office hours and make an appointment.

46. SEE PCP WITHIN 2 WEEKS: You need an evaluation for this ongoing problem within the next 2 weeks. Call your doctor during regular office hours and make an appointment.

47. INFORMATION OR ADVICE ONLY CALL.

48. HOME CARE: You should be able to treat this at home.

49. CALL PCP NOW: You need to discuss this with your doctor. I'll page him now. If you haven't heard from the on-call doctor within 30 minutes, call again.

50. CALL PCP WITHIN 24 HOURS: You need to discuss this with your doctor within the next 24 hours.
   - IF OFFICE WILL BE OPEN: Call the office when it opens tomorrow morning.
   - IF OFFICE WILL BE CLOSED: I'll page him now. (EXCEPTION: from 9 pm to 9 am. Since this isn't urgent, we'll hold the page until morning.)

51. CALL PCP WHEN OFFICE IS OPEN: You need to discuss this with your doctor within the next few days. Call him/her during regular office hours.

52. GO TO L&D NOW: You need to be seen. Go to the Labor and Delivery Unit or the Emergency Room at __________ Hospital. Leave now. Drive carefully.

53. GO TO L&D NOW (or PCP triage):
   - IF NO PCP TRIAGE: You need to be seen. Go to the Labor and Delivery Unit at __________ Hospital within the next hour. Leave as soon as you can.
   - IF PCP TRIAGE REQUIRED: You may need to be seen. Your doctor will want to talk with you to decide what's best. I'll page him now. If you haven't heard from the on-call doctor within 30 minutes, go to the Labor and Delivery Unit at __________ Hospital.
76. FEVER MEDICINE:
   - Fever above 101° F (38.3° C) should be treated with acetaminophen. This can be
     taken by mouth as pills or per rectum using a suppository. Both are available over
     the counter. Usual adult dose is 650 mg by mouth or per rectum every 6 hours.
     - The goal of fever therapy is to bring the fever down to a comfortable level.
     Remember that fever medicine usually lowers fever 2-3° F (1-1.5° C).

80. DRIVING: Another adult should drive.

89. CALL BACK IF:
    - You become worse.

90. CALL BACK IF:
    - You have more questions.

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