

Standard Operating Procedure for Fetal Ectopic Beat (Midwife)

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1. Confirm presence of ectopic beat by ultrasound scan.
2. Explain to woman and partner ectopic beats common, and reflect immaturity of the fetal heart and often resolve spontaneously.
3. Advice women to reduce stimulants including caffeine, chocolate and vanilla, and to abstain from smoking as these all increase the chance of ectopic beats. Reduce maternal stresses as much as possible.
4. If fetal heart rate between 110 and 160 and no hydrops on USS reassure. Arrange follow up scan in one week. If fetal heart rate outside this range or hydrops present for urgent obstetric review.
5. Arrange CMW to auscultate weekly.
6. Explain to woman plan of weekly scan and weekly auscultation until ectopic beats no longer identified on one ultrasound scan, when care will revert to normal care schedule as planned before ectopic beats identified.
7. Explain importance of fetal movements as a sign of fetal wellbeing and the need to report any concerns, any time of the day. Ensure woman has fetal movements leaflet.
8. If ectopic beats still present at 36/40 make appointment for Obstetric led care between 37 and 38/40.
9. If woman has any remaining concerns and wishes to speak to doctor then arrange ANC appointment next available.

Maternity Services

Checklist for Clinical Guidelines being submitted for Approval by Maternity

Quality & Safety Group

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