

Classification of FHR Patterns

FHR Classification	Baseline Heart Rate	Variability Reactivity	Decelerations
Reassuring	<ul style="list-style-type: none"> • 110-150 bpm 	<ul style="list-style-type: none"> • 6-25 bpm • Accelerations present 	<ul style="list-style-type: none"> • Early decelerations • Variable decelerations with a duration of < 60 sec and depth < 60 beats
Non-Reassuring, Grade I	<p>Bradycardia:</p> <ul style="list-style-type: none"> • Rate < 110 bpm (without accelerations) • Episode > 2 minutes duration regardless of reactivity or variability <p>Tachycardia:</p> <ul style="list-style-type: none"> • Rate 150-170 bpm and minimal variability • Rate > 170 bpm 	<ul style="list-style-type: none"> • ≤ 5 bpm for > 40 min • ≥ 25 bpm for > 40 min • Accelerations absent 	<ul style="list-style-type: none"> • Variable decelerations with a duration of > 60 sec or depth > 60 beats • Repetitive late decelerations
Non-reassuring, Grade 2-Preterminal	<ul style="list-style-type: none"> • Absent variability and reactivity regardless of other FHR patterns • Sinusoidal pattern 		

The intended use of this FHR classification system is to suggest clinical conditions in which adjunctive use of ST waveform changes may aid the interpretation of specific non-reassuring FHR patterns.

STAN® Simplified Clinical Guidelines

These guidelines are intended for a pregnancy of at least 36 completed weeks. They may indicate situations in which obstetric intervention is required. Interventions may include delivery or maternal-fetal resuscitation by alleviation of contributing problems such as over-stimulation or maternal hypotension. The timing of delivery should be related to stage of labor and degree of abnormality as indicated in the guideline grid.

	Reassuring FHR	Non-reassuring FHR, grade 1	Non-reassuring FHR, grade 2 Preterminal FHR
No ST Change	“Routine Management” Continued observation	Expectant management in first stage of labor Delivery within 90 minutes during 2nd stage of labor	Resuscitation and delivery should be undertaken as soon as possible regardless of any ST changes
Episodic T/QRS Rise (>0.10* and duration < 10 min)	“Routine Management” Continued observation	Delivery should occur within 30 minutes in 1st stage of labor Delivery should occur as soon as possible during 2nd stage of labor	
Baseline T/QRS Rise (>0.05* and duration >10 min)	“Routine Management” Continued observation		
Biphasic ST If 2 biphasic log messages**	Closer Observation		

*Compared to baseline T/QRS **BPs grade 2 and 3 are regarded as significant

Recommendations for intervention using FHR patterns and ST waveform changes

Non-reassuring, Grade 2 (preterminal) would prompt an expedited delivery without the need to consider ST data.

Non-reassuring, Grade 1 with episodic T/QRS rise, baseline rise, or repeated biphasic ST pattern would mandate delivery within 30 minutes or less.

At start-up and when there is a decrease in signal quality with discontinuous T/QRS ratios, manual data analysis is required.

