Intrapartum Fetal Assessment: Do Obstetric Anaesthetists Know Enough?

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Introduction: Anaesthetists are part of a multi-professional team that provides care for parturients. In this setting where rapidly evolving clinical situations are frequently encountered, an appreciation of the degree of urgency is imperative for sound decision-making. It is essential that anaesthetists have adequate knowledge of intrapartum fetal assessment and of the methods employed to promote fetal well-being in-utero, in compliance with The Royal College of Anaesthetists’ guidance on competency-based training requirements. [1]

Methods: A questionnaire was developed and pre-piloted. An online survey was then created and the link was forwarded to anaesthetists of all grades. Questions were posed on the indices that suggest intrapartum fetal distress and on measures of intrauterine fetal resuscitation (IUFR). We also surveyed opinion on whether this topic should be included in the curriculum for the Fellowship of the Royal College of Anaesthetists (FRCA) examination.

Results: 123 anaesthetists completed the questionnaire (20 consultants, 13 non-consultant career grades and 90 trainees, all of whom provided cover on labour ward independently).

- 19/123 (15%) were able to identify the correct range of baseline FHR[2], 98/123 (80%) were incorrect, and 6/123 (5%) did not know.
- 67/123 (54%) gave the correct value for fetal scalp pH that requires intervention[2], while 34/123 (28%) were incorrect, and 22/123 (18%) did not know.
- 74/123 (61%) claimed they were able to interpret cardiotocograph (CTG). Of this group, only 14/74 (20%) knew the correct range of baseline FHR, whilst 60/74 (80%) were incorrect.
- 15/123 (12%) identified 5 or more features that render CTG abnormal, while 9/123 (7%) did not know any. Fetal bradycardia was the most frequently quoted feature (80/123; 65%).
- Only 22/123 (18%) had received formal teaching on CTG interpretation.
- 22/123 (18%) identified 5 or more methods of IUFR[3], while 11/123 (9%) did not know any. Left lateral tilt was the most frequently quoted method (101/123; 82%).
- 66% (82/123) thought that basic fetal assessment should be included in the FRCA curriculum.

Conclusion: Our results showed anaesthetists’ knowledge of intrapartum fetal assessment to be inadequate. Attendance of relevant courses as the Practical Obstetric Multi-Professional Training course (PROMPT™) should thus be encouraged, and greater emphasis must be placed on this topic at teaching. Some anaesthetists expressed views that fetal assessment was of more relevance to obstetric practice. The majority, however, agreed it should be a component of the anaesthetic curriculum.

References: