

Timing of ultrasound after recurrent reduced fetal movements: association between delays and obstetric intervention

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Background & Objective

Assess adherence to recommended ultrasound timelines following RFM and evaluate whether delays are associated with increased obstetric intervention.

Methods

Retrospective service evaluation (audit) of 51 pregnancies.

Ultrasound timing was categorised as timely (≤ 24 hours) or delayed (> 24 hours). Primary outcomes were induction of labour (IOL), caesarean section (CS), and neonatal intensive care unit (NICU) admission. Relative risk (RR) of intervention associated with delayed scanning was calculated.

Findings

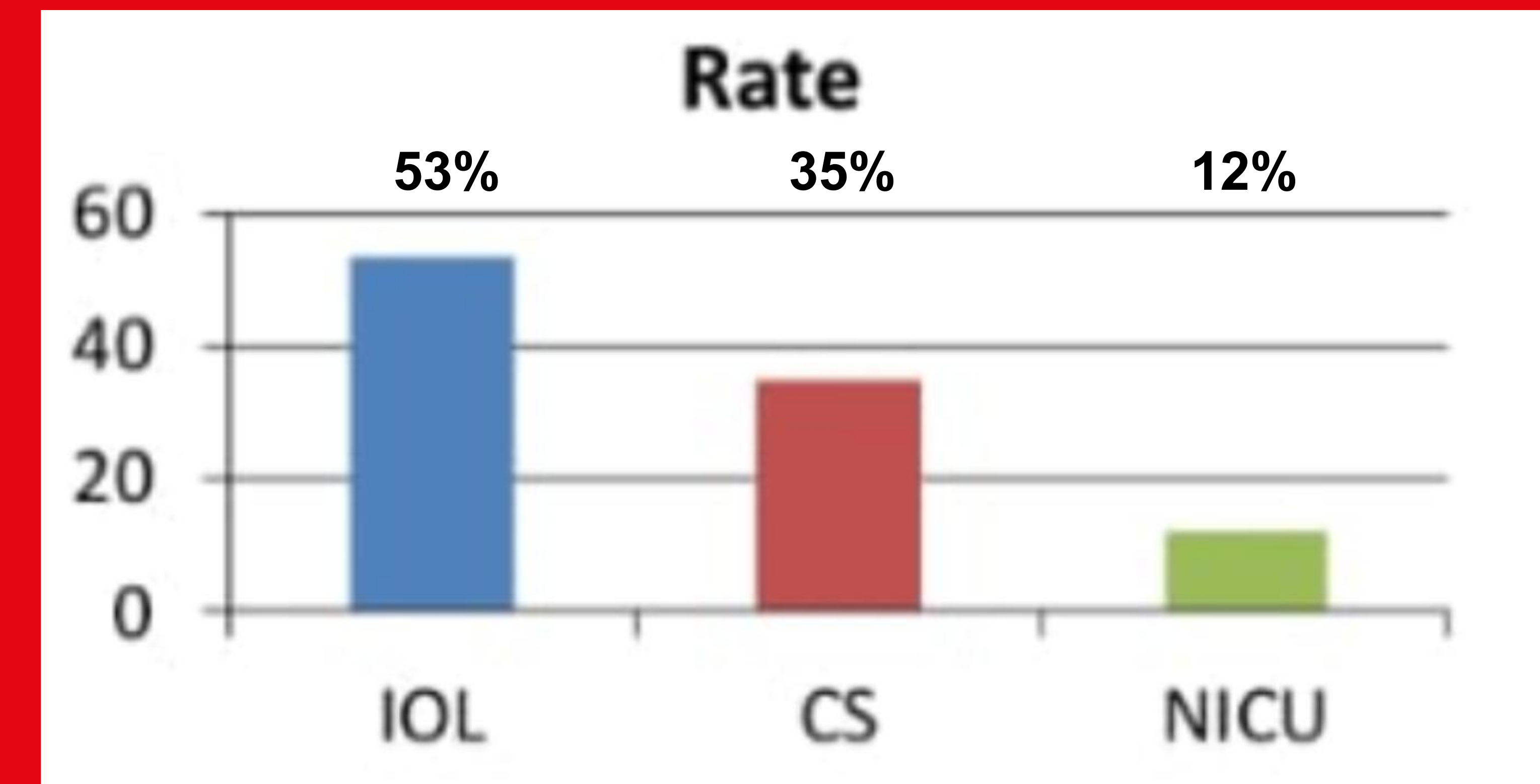
Mean time to scan : 74 hrs (2 hrs – 14 days)
Only 21% scanned within 24 hours
IOL incidence 53%
CS incidence 35%
NICU incidence 12%

Results

RR associated with delayed scans (IOL or CS)
1.13 (95% CI 0.47–2.71)

Conclusion

Delayed ultrasound assessment following reduced fetal movements is common and may contribute to increased obstetric intervention, highlighting the need for improved triage and timely fetal evaluation.



Incidence of outcomes.

References

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