

South Australian Perinatal Practice Guideline Decreased Fetal Movements

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Note:

This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

SA Health does not accept responsibility for the quality or accuracy of material on websites linked from this site and does not sponsor, approve, or endorse materials on such links.

Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient's medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate, and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements, and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

Note: The words woman/women/mother/she/her have been used throughout this guideline as most pregnant and birthing people identify with their birth sex. However, for the purpose of this guideline, these terms include people who do not identify as women or mothers, including those with a non-binary identity. All clinicians should ask the pregnant person what their preferred term is and ensure this is communicated to the healthcare team.

Explanation of the aboriginal artwork:

The aboriginal artwork used symbolises the connection to country and the circle shape shows the strong relationships amongst families and the aboriginal culture. The horseshoe shape design shown in front of the generic statement symbolises a woman and those enclosing a smaller horseshoe shape depicts a pregnant woman. The smaller horseshoe shape in this instance represents the unborn child. The artwork shown before the specific statements within the document symbolises a footprint and demonstrates the need to move forward together in unison.



Australian Aboriginal Culture is the oldest living culture in the world, yet Aboriginal people continue to experience the poorest health outcomes when compared to non-Aboriginal Australians. In South Australia, Aboriginal women are 2-5 times more likely to die in childbirth and their babies are 2-3 times more likely to be of low birth weight. The accumulative effects of stress, low socio-economic status, exposure to violence, historical trauma, culturally unsafe and discriminatory health services, and health systems are all major contributors to the disparities in Aboriginal maternal and birthing outcomes. Despite these unacceptable statistics the birth of an Aboriginal baby is a celebration of life and an important cultural event bringing family together in celebration, obligation, and responsibility. The diversity between Aboriginal cultures, language and practices differ greatly and so it is imperative that perinatal services prepare to respectfully manage Aboriginal protocol and provide a culturally positive health care experience for Aboriginal people to ensure the best maternal, neonatal and child health outcomes.

Purpose and Scope of PPG

The purpose of this guideline is to provide clinicians with guidance for the care of women who are concerned about decreased fetal movements from 28 weeks gestation with the aim of reducing stillbirth rates.



Flowchart 1 | Safer Baby Bundle Decreased Fetal Movement (DFM) Care Pathway

Decreased Fetal Movement (DFM) Care Pathway
 for women with singleton pregnancies from 28+0 weeks' gestation



*If women have a concern of DFM prior to 28 weeks' gestation, they should be advised to contact their care provider. There is currently insufficient evidence to inform the management of women who report DFM prior to 28 weeks' gestation.
 Disclaimer: This DFM Care Pathway is for general guidance only and is subject to a clinician's expert judgement. The DFM Care Pathway should not be relied on as a substitute for clinical advice.

Decreased Fetal Movements

Introduction

The Perinatal Society of Australia and New Zealand (PSANZ), has given permission to SA Health through the Maternal, Neonatal and Gynaecology Strategic Executive Leadership Committee (MNGSELC) to publish links to information on their website at www.psanz.com.au/

The Stillbirth and Neonatal Death Alliance (SANDA) of the PSANZ, in partnership with the National Health and Medical Research Council (NHMRC) Centre of Research Excellence in Stillbirth and the Stillbirth Foundation Australia have developed the

[*Clinical Practice Guideline for the Care of Women with Decreased Fetal Movements with a Singleton Pregnancy from 28 weeks' gestation*](#)

This guideline has been endorsed by several Australian peak bodies and stakeholders in women's health and therefore been endorsed as the *Decreased Fetal Movements PPG* for the management of decreased fetal movements in South Australia.

Clinical Guideline

As per Stillbirth CRE [Clinical Practice Guideline: For the care of women with women decreased fetal movements with a singleton pregnancy from 28 weeks' gestation.](#)

Information for Women

- Women should be provided with information consistent with the **Movement Matters** brochure found on the Stillbirth CRE website at www.stillbirthcre.org.au under *Decreased Fetal Movements (DFM) Resources*.
- The brochure is also available in other languages under *Translated Resources* at www.stillbirthcre.org.au.
- The **Bubba's Movements Matter** brochure is a consumer approved resource for Aboriginal women and their families. The brochure can be found on the Stronger Bubba Born website at www.strongerbubbaborn.org.au.
- Clinicians should emphasise the importance of maternal awareness of fetal movements at each visit.
- Women concerned about decreased fetal movements should be advised to contact their health care provider immediately.¹

eLearning Resource for Health Professionals

To learn more about the Safer Baby Bundle clinicians can complete an eLearning module through the Stillbirth CRE website. Register and create a new account using the following link: <https://learn.stillbirthcre.org.au/#elearning>

References

1. Perinatal Society of Australia and New Zealand and Centre of Research Excellence Stillbirth. Clinical practice guideline for the care of women with decreased fetal movements with a singleton pregnancy from 28 weeks' gestation. Centre of Research Excellence in Stillbirth. Brisbane, Australia, September 2022. https://learn.stillbirthcre.org.au/wp-content/uploads/2023/05/DFM_Clinical-Practice-Guideline_V2.5_Mar2023.pdf



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 Does this perinatal practice guideline amend or update an existing perinatal practice guideline? **Y**
 If so, which version? V4.1
 Does this perinatal practice guideline replace another perinatal practice guideline or policy with a different title? **N**
 If so, which perinatal practice guideline (title)?

Approval Date	Version	Who approved New/Revised Version	Reason for Change
07/11/2024	V5	Clinical Guidelines Domain Custodian	Updated SANDA and PSANZ decreased fetal movement care pathway and consumer brochure links to align with new recommendations.
09/02/2022	V4.1	Clinical Governance, Safety and Quality Policy Domain Custodian	Updated Care Pathway to align with SANDA and PSANZ recommendations
10/07/2018	V4.0	SA Safety and Quality Strategic Governance Committee	Formally reviewed in line with 3-year scheduled timeline for review.
19/04/2016	V3.0	SA Safety and Quality Strategic Governance Committee	Formally reviewed in line with 3-year scheduled timeline for review.
21/01/2014	V2.0	SA Safety and Quality Strategic Governance Committee	Formally reviewed in line with 3-year scheduled timeline for review.
22/11/2011	V1.0	SA Safety and Quality Strategic Governance Committee	Original SQSGC approved version.