Interpretation of a CTG trace during labour (13HDC01430, 7 April 2015)

Community-based midwife ~ Obstetrician ~ Labour ~ CTG interpretation ~ Delayed consultation ~ Right 4(1)

A woman who was pregnant with her first child went into labour at 40+4 weeks' gestation. The woman met her LMC midwife at the delivery unit at hospital. Upon assessment, the LMC noted that the woman was experiencing contractions at a rate of three every ten minutes and that, on vaginal examination, the cervical opening could not be reached. A CTG was commenced to monitor the fetal heart rate (FHR).

The LMC noted non-reassuring features on the CTG recording and continued to monitor the FHR, but did not interpret the CTG as requiring consultation with the obstetric team. A second vaginal examination was carried out an hour later by the LMC and the cervix was found to be 2cm dilated. The woman was then given 100mg of pethidine and 2.5mg of Droleptan to help her sleep.

Shortly afterwards the LMC noted a prolonged deceleration of the FHR down to 60bpm. Five minutes later she called the on-call locum obstetric consultant as she was no longer able to detect a fetal heartbeat.

The consultant arrived 20 minutes later and carried out an assessment, which confirmed the absence of a fetal heartbeat. The consultant then made the decision to perform a Caesarean section, on the basis that a fetal heartbeat had been present within the previous 20 minutes. A Caesarean section was performed, and the baby was born floppy and not breathing. Resuscitation was commenced but, sadly, the baby was pronounced stillborn.

It was found that the CTG showed non-reassuring features which warranted earlier consultation with the on-call obstetrician and that by failing to interpret the CTG trace correctly and, as a result, failing to contact the on-call obstetrician early enough, the LMC failed to provide services with reasonable care and skill and, accordingly, breached Right 4(1).

Adverse comment was also made about the consultant's decision to proceed with a Caesarean section in the circumstances.