Clinial Case Study

Background: The Pregnant Woman in 35+ 2 week of physiological pregnancy without any pathological symptoms. First pregnancy, unencumbered medical history. Covid-19 infection between 12-14 week of pregnancy, without confirmed complications. After 3 repetitions, Patient sent to the hospital, emergency.







Midwife description: "CTG recording result to be repeated for medical reasons. Follow the recommendations from the telephone conversation with the medical expert. Record with a tendency to **narrowed oscillation**, suggesting fetal sleep. Normocardia, fetal heart rate is 120-150u/min. Uterine muscle activity not found. It was recommended to repeat the test after hydration for up to 2 h and to try to perform the test in a different body position. BFHR 148 u/min"





Midwife description: "Result of CTG recording to be repeated for medical reasons. Normocardia. The activity Oscillation with a narrow tendency. Recording with low quantity of accelerations. Decelerations absent. Questionable recording. Absence of uterine muscle contraction activity. Fetal movements present. BFHR value approximately 147 bpm. Recommendation to repeat the recording in up to 2 h interval"



Midwife description: "Contact your doctor/midwife with the result of the CTG recording. Follow the recommendations from the phone call with the medical expert. Normocardia. The fetal heart rate is 130-160 bpm. Oscillation with **narrow tendency**. Decelerations absent. Low acceleration recording, suspicious. Absence of contractile activity of the uterine muscle. Fetal movements present. BFHR value of approximately 148 bpm. During the phone call, it was recommended to go to the nearest hospital facility for FHR observation. The patient will go by her own transportation." **Results:** Baby saved by cesarean section shortly after admission to the hospital. It was the last moment to save the baby. Lack of movement was found to be related to hypoxia. The baby lost 30% of its blood - the mother drew blood from the baby. The cause was probably a history of COVID-19 infection in the first weeks of pregnancy.

Conclusion: Thanks to the CTG home, online monitoring and being in constant supervision of professional midwives, baby had been saved.

