**Checklist for Eligibility of Intermittent Auscultation (IA)**

*Please check the box if the maternal or fetal factor is present.*

**Antepartum and Intrapartum Maternal Factors:**

☐Spontaneous labor and normal frequency of contractions (No Oxytocin)

☐No serious maternal health conditions (e.g. diabetes, gestational HTN, preeclampsia or eclampsia)

☐Rupture of membranes <24 hours

☐Absence of antenatal vaginal hemorrhage

☐No previous uterine scar (TOLAC)

☐Afebrile (<38°C, absence of chorioamnionitis or intrauterine infection)

☐Absence of regional analgesia (e.g. epidural, ITN)

☐Absence of trauma

☐Absence of morbid obesity (BMI >35)

**Antepartum and Intrapartum Fetal Factors:**

☐Singleton pregnancy

☐Term pregnancy (≥37 weeks gestation)

☐Category 1 tracing on initial monitoring with NICHD interpretation

 *(Normal baseline, moderate variability, accelerations present or absent, early decelerations present or absent, absence of*

*variable, late or prolonged decelerations)*

☐Vertex presentation

☐Normal fetal growth and amniotic fluid index

☐Normal fetal movements

☐Clear amniotic fluid throughout labor (no meconium-stained fluid)

After initial admission monitoring that meets criteria for Category 1 per NICHD classification and presence of the above maternal and fetal factors, discontinue continuous fetal monitoring and perform intermittent fetal heart rate auscultation (IA) according to AWHONN guidelines. Acceptability for use of IA is an ongoing process, and it at any point the woman no longer meets low-risk criteria, obtain informed consent and then initiate continuous EFM. Additionally, if any member of the team deems IA is not sufficient, EFM can be utilized.