# **Basic Fetal Monitoring - Spring 2025**

April 9, 2025 9 am – 3 pm Registration opens at 8:30 am

#### Live Webinar

# Program Overview and Objectives

This live program will introduce basic fetal monitoring principles to the new perinatal nurse.

Upon completion of this knowledge-based program, participants should be better able to:

- Understand basic physiology of the fetal heart rate
- Demonstrate the use of the National Institute of Child Health and Human Development (NICHD) monitoring definitions.
- Discuss advantages/disadvantages of different monitoring modalities.
- Interpret results of common antenatal testing.
- Interpret fetal heart rate patterns using a systematic approach and approved NICHD definitions.
- Discuss physiologic interventions for intrauterine resuscitation.
- Demonstrate communication strategies for the effective interdisciplinary collaboration surrounding fetal monitoring.



# **Faculty**

Tammy J. Goodwin, MSN, RN-C-OB, C-EFM Nurse Manager, Women's & Children 2 Med Surg East Novant Health Thomasville Medical Center Thomasville, NC

# **Who Should Participate**

Nurses with less than one year of experience with EFM.

As part of our commitment to creating a space where all BELONG, Northwest AHEC provides education and encouragement for respectful care for all, regardless of socioeconomic status, race, ethnicity, language, nationality, sex, gender identity, sexual orientation, religion, geography, disability, and age.

Provided by:

Northwest Area Health Education Center (AHEC), a program of Wake Forest University School of Medicine and part of the NC AHEC System.





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#### Credit

- 5.0 Contact Hours from Northwest AHEC
- 5.0 Nursing Contact Hours

Northwest Area Health Education Center (NWAHEC) is approved as a provider of nursing continuing professional development by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

Criteria for successful completion requires attendance for at least 90% of the activity and submission of the valuation.

Credit will be awarded based on participant selection at time of registration. Before selecting credits, please review our general **Credit Glossary** but note not all programs offer all credits.

Registering for and attending this program authorizes Northwest AHEC/Wake Forest University School of Medicine to take pictures to be used for the Center's publications, website (including social media sites) and presentations.

### Registration

**\$105** — Registration fee

**\$95** — Group rate per person when a group of three or more registrations are scanned and attached to the same mail or mailed in the same envelope or in the same fax.

**Register and pay online** at <a href="www.nwahec.org/74985">www.nwahec.org/74985</a> or complete and return the attached registration from. Payment by credit card (Visa, MasterCard, American Express and Discover) or Atrium Health Wake Forest Baptist internal transfer accepted online. Personal check, corporate check, money order, accepted by mail.

#### Payment Policy:

Payment is required on or before entrance into any Northwest AHEC activity. If a corporate payment has not been received prior to the activity start date, you will be required to provide a personal credit card or check. If the corporate payment has not been received two weeks post activity, your personal credit card or check will be charged or cashed. To avoid personal payment, you should check with the financial staff at your organization to determine status of payment.

#### **Refund Policy:**

Cancellations received in our office at least two weeks (14 business days) before the activity will receive a 100 percent refund. Registrants cancelling between two weeks and five full business days prior to the first day of the event will be refunded at 70% of the registration fee subject to a minimum \$25 cancellation fee. The registration fee will not be refunded if a cancellation is received less than five days before the activity. Cancellations must be in writing (email). You may send a substitute in your place.

**Note** — If you have not received confirmation of your registration 24 hours before the program date, please call Gail Pawlik at 336-713-7761 or email **gpawlik@wakehealth.edu** to verify the status of your registration.

### Looking for an in-person event?

This event will be held as a live, in-person event in Fall of 2025. If you prefer an in-person event, please click <a href="https://www.nwahec.org/74986">www.nwahec.org/74986</a> for more information.

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### Agenda

Wed., April 9, 2025

8:30 am Registration Begins

9 am Introduction to Basic Fetal Monitoring

Basic Anatomy & Physiology Equipment & Technology

**Antenatal Testing** 

10 am Break

10:15 am **Terminology for FHR Interpretation** 

Systematic Analysis of Tracings Risk Factors Impacting FHR

11:15 am **Lunch** 

12:15 pm Physiological Interventions

**Standards of Care** 

1 pm Break

1:15 pm Case Studies

**Documentation** 

2 pm **Q&A** 

3 pm Adjourn

### For More Information and Assistance

If you have any questions regarding registration, please contact Gail Pawlik by email at **gpawlik@wakehealth.edu** or by phone at 336-713-7761. Any requests for special services or auxillary aids should by made to Gail Pawllik at least five days prior to the activity.

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Register online at www.nwahec.org/74985 or use the form below.

Registration Form				ect request for credit.	
Please select registration fee:  ☐ \$105—Individual rate per person			(See credit section of brochure for details.)  □ 5.0 Contact Hours  □ 5.0 Nursing Contact Hours		
Primary Phone # (last 4 digits only):	* requir	red			
First Name MI	Last		Degr	rees (e.g., MD)	
Profession	Job Title				
Home Address	City	State	Zip	County	
Home Phone	Cell Phone				
Employer					
Employer Address	City	State	Zip	County	
Employer Phone	Employer Fax				
Email required: Home Email		□ Work	Email		
By providing your fax number, email address and telephone numbers and address indicated.	e number, you have	granted pe	rmission for	us to contact you via the	
Ways to Register:					
☐ Please register ONLINE at <u>www.nwahec.org/74985</u> (r. Visa, MasterCard, Discover Card and American Express		ly.			
■ Make check payable to: Wake Forest University Health Wake Forest University School of Medicine / NW AHEC Medical Center Boulevard, Winston-Salem, NC 27157-3 Attention: Gail Pawlik		with registra	ation form, to	o:	
☐ AHWFB Transfer:		Project			
Comp Op Unit Cost Ctr Nat Acc	t Program Fund				
☐ <b>Employer Payment:</b> Supervisor to complete the below	w and return to gpa	wlik@wakeł	nealth.edu o	r fax to 336-713-7701.	
Supervisor's Name (Printed)	Signature		P	hone	

By signing, I am certifying that agency payment will follow. I understand that if I have a balance due and do not attend or send a substitute that I will be invoiced for the full program fee.