Author's response to reviews

Title: Professionals' views of fetal monitoring during labour: A systematic review and thematic analysis

Authors:

Valerie Smith (smithv1@tcd.ie)
Cecily Begley (cbegley@tcd.ie)
Mike Clarke (m.clarke@qub.ac.uk)
Declan Devane (declan.devane@nuigalway.ie)

Version: 3 Date: 30 November 2012

Author's response to reviews: see over
Cover Letter

Dr Valerie Smith,
The University of Dublin, Trinity College Dublin,
School of Nursing & Midwifery,
24 D'Olier Street, Dublin 2, Ireland.
Tel: 00353-1-8964031.
30th November 2012

Dear Editor,

Re: MS: 6062325918124654

Professionals’ views of fetal monitoring during labour: a systematic review and thematic analysis Valerie Smith, Cecily Begley, Mike Clarke and Declan Devane

Many thanks for reviewers’ comments on our above titled paper. We have addressed these comments as detailed with this letter, highlighting changes made to the manuscript as suggested. We hope our paper now meets the requirements for publication.

Yours sincerely,

Valerie Smith

---

Reply to Reviewers’ Comments:

1. **Reviewer: Joerg Kessler**

This is a thoroughly prepared manuscript which reviews the professionals’ attitude on fetal monitoring. It provides an interesting synthesis of qualitative and quantitative studies.
I miss one important aspect in the description of the studies in table 1. What was the frequency of EFM and IA in the respective studies? The authors could easily add a column to this table which gives some key information on the obstetric units involved (N deliveries, C-section rate).

**Reply:** The studies included in this review do not provide details of EFM versus IA frequencies nor do they provide details on labour and birth outcomes (as a quantitative RCT study might do). The focus of the studies included in this review was ‘views’ of professionals on FHR monitoring during labour. Therefore it is not possible to provide this information as requested.

The second point which could be discussed more in detail is potential role of differentiating type of surveillance according to perceived risk. A third point which may be discussed is how to deal with the issue of reassurance/safety. The development of Doppler devices of auscultation which are able to store the auscultated heart rate together with the current date and time could at provide a better quality of documentation.

**Reply:** The second and third point have been addressed by adding an additional paragraph to the discussion section as follows:

"Determining choice for or differentiating between types of FHR surveillance based on perceptions of risk as influenced by feelings of safety and reassurance can pose challenges for professionals in clinical practice. This is because the notion of risk in maternity care remains ill-defined and ambiguous and is often made more complex by professionals interpreting risk in very different ways depending on knowledge and past experiences [35]. The identified need by professionals, to have hard-copy proof of FHR surveillance, as a perceived safety mechanism and as a potential protector against possible litigation, might be overcome by recent developments in FHR monitoring technology. These developments include the ability of hand-held Doppler devices to sequentially store information on FHR auscultations and in some instances produce paper print-outs of intermittent FHR recordings. This ‘paper-proof’ could potentially facilitate the choice of IA over EFM as it addresses the concern, to some extent, of safety and reassurance when performing FHR monitoring in clinical practice."

2. **Reviewer:** Marlene Sinclair

Is the question posed original, important and well defined? This subject is timely and appropriate
Reply: No change required

Are the data sound and well controlled? The management of the data is clearly described and tabled in a comprehensive manner Is the interpretation (discussion and conclusion) well balanced and supported by the data? The discussion is comprehensive as it stands.

Reply: No change required

However my personal interest in the subject area leads me to believe that many professional and discursive papers that have technology as a key word may offer further insights and interpretation. This is not essential.

Reply: No change required

Are the methods appropriate and well described, and are sufficient details provided to allow others to evaluate and/or replicate the work? Clear inclusion, exclusion criteria are detailed and well explained in the text. I have some reservations about the exclusion of technology but can live with this.

Reply: No change required

Can the writing, organization, tables and figures be improved? The abstract is succinct and based on data analysis.

Reply: No change required

The conclusion is totally inappropriate as a conclusion and needs to be revised and cut back considerably with more emphasis on the discussion.

Reply: The conclusion has been revised as follows; significantly cut-back and shortened with text originally in the conclusion now merged into the Discussion section

3. Reviewer: Kazuo Maeda

I may hope the statistics of more objective results obtained by fetal monitoring, the reader of the article will have their own judgement.

Reply: No change required