



Fetal Death Screening Tool, Instructions

Fetal, Infant, Child, & Maternal Mortality Review & Prevention Team (FICMMR)

Purpose:

The Fetal Death Screening Tool helps determine whether a mortality review should be conducted by the FICMMR Team while also identifying major risk factors (modifiable & non-modifiable) for fetal demise.

After using the screening tool, if a FICMMR leader feels a review is needed due to lack of information or presence of risk factors they are encouraged to proceed with review. *In these cases, a FICMMR review can help determine whether interventions and services are present in the community to help reduce these risk factors. This can lead to discussion on prevention efforts at the local level, which is a major goal of FICMMR.* Fetal cases that go forward to a mortality review need to be entered into the National Fatality Review - Case Reporting System (secure, online database).

Definition of Terms:

fetal Death - Stillborn birth of fetus weighing 350 grams or higher. Only if the weight is unknown, do you rely on 20 weeks gestation period or higher to qualify as a fetal death.

Illicit Drug use - Maternal use of illegal and non-medical misuse of controlled drugs during pregnancy (including, but not limited to stimulants, sedatives, tranquilizers, and pain relievers).

Fetal Death Screening - Local FICMMR leader will use the Fetal Death Screening Tool to screen all qualifying fetal deaths, 350 grams of fetal weight or higher. Upon completion, local leader recommends if a mortality review should be conducted.

Late Entry to Prenatal Care - Maternal entry to prenatal care after 12 completed weeks of pregnancy.

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Process,_TIQs:

1. Local FICMMR leaders are notified of fetal deaths once a month by the State FICMMR Office.
2. State FICMMR Office provides you with the Montana Certificate of Fetal Death through the state secure email system. *NOTE:* Fetal death certificates from your local county clerk & recorder do not have the necessary medical information included on the certified state copy.
3. Local FICMMR leader will screen **all qualified fetal deaths** (weight of 350 grams or more) using the Montana Certificate of Fetal Death and the Screening Tool (page 2 of this document). Based on screening results, local FICMMR leader recommends if fetal demise goes to a team review.
4. **Key records to complete tool:** Prenatal Care, Labor & Delivery, Certified 'State' Death Certificate.

NOTE: If you know about a fetal demise, but do not see it on the monthly death list and/or you do not receive the Montana Certificate of Fetal Death from the State 3 months out from date of delivery, please be sure to contact the State FICMMR Coordinator, 406.444.3394.

DATE OF DEATH:

DEATH CERTIFICATE NUMBER:

COUNTY OF MATERNAL RESIDENCE:

COUNTY OF DEATH:

RISK FACTOR	Please mark answer		
	Yes	No	Unknown
Environmental Factors-Maternal			
Mother smoked/used tobacco products during pregnancy	Yes	No	Unknown
Pregnant non-smoking mother exposed to second hand smoke	Yes	No	Unknown
Maternal misuse of prescription medications during pregnancy	Yes	No	Unknown
Maternal alcohol or illicit drug use during pregnancy	Yes	No	Unknown
Homeless during pregnancy	Yes	No	Unknown
Mother experienced domestic violence during pregnancy	Yes	No	Unknown
Prenatal or Maternal Medical History			
Maternal history of previous preterm delivery	Yes	No	Unknown
Maternal history of previous fetal loss	Yes	No	Unknown
Late entry to prenatal care (after 12 completed weeks of pregnancy)	Yes	No	Unknown
No prenatal care	Yes	No	Unknown
NEW- Maternal history of a preventable and/or treatable infectious disease during pregnancy (e.g., syphilis, COVID-19, gonorrhea, other)	Yes	No	Unknown
Maternal hypertension diagnosed before or during pregnancy	Yes	No	Unknown
Maternal diabetes diagnosed before or during pregnancy	Yes	No	Unknown
Maternal obesity	Yes	No	Unknown
Maternal age <19 or >35 years	Yes	No	Unknown
Pregnancy Outcome			
Was fetus delivered by c-section?	Yes	No	Unknown
Multiple birth gestation	Yes	No	Unknown
Congenital anomaly not compatible with life	Yes	No	Unknown
Placental or cord problems	Yes	No	Unknown
Fetal gestational age 20-36 weeks	Yes	No	Unknown
Fetal gestational age 37 weeks	Yes	No	Unknown
TOTAL			
A REVIEW /5 RECOMMENDED IF: THE ANSWER INCLUDES ANY BOLDED ITEM INCLUDING UNKNOWN			
MORTALITY REVIEW NEEDED?			
Return ONLY completed screening tools marked "No" to the State FICMMR Office for approval via email scan or fax 406.444.2750. If faxing, please let state FICMMR coordinator know a fax is enroute.			
KEEP screening tools marked Yes in your secure files as you prepare for your upcoming review.			