

FETAL KICK COUNTS

1. What is kick counting?

The occurrence of frequent baby movements during pregnancy is an excellent indicator of fetal well-being. The first fetal movements or "flutters" are usually felt by the mother between the 16th and the 20th week of pregnancy. Movements generally increase in strength and frequency through pregnancy, particularly at night, and when the woman is at rest. At the end of pregnancy (36 weeks and beyond), there is normally a slow change in movements, with fewer jabs and more rolling and stretching movements.

Kick count is the maternal counting and tracking of fetal movement. Medical research supports kick count as a simple, valuable, effective, reliable and harmless screening of fetal well-being during the third trimester in both low- and high-risk pregnancies.

Kick count is fetal movement counting which includes kicks, turns, twists, swishes, rolls, and jabs but not hiccups. Significant changes in the fetal movement pattern may help identify potential problems with your pregnancy that may need further evaluation and treatment before the baby's heart rate is affected. In this way, it can help prevent stillbirth.

There are different ways to do kick counting. The American College of Obstetricians and Gynecologists (ACOG) recommends that you note the time it takes to feel 10 kicks, twists, turns, swishes, or rolls. A healthy baby should have 10 movements in less than 2 hours. Most babies will take less than 30 minutes. Some providers may recommend that if there have not been 10 kicks in 1 hour, you should contact your provider for further evaluation.

2. Why is doing kick counting important?

Be Proactive. You are proactive in protecting the well being of your baby by going to routine prenatal care visits and doing routine tests to detect and prevent possible pregnancy complications.

You can continue the commitment to your baby's health by being vigilant of his or her movement. Dedicate typically less than 30 minutes a day to do the kick count!

Get to know your baby. Even if your baby is very active, doing the kick count will allow you to be familiar with the "normal" pattern of your baby and thus you can more easily detect the gradual or sudden changes in the pattern of your baby's movements.

Bond with your baby. You will only feel those precious movements, kicks, jabs, swish, and rolls while the baby is inside of you. Kick counting provides a special time when you can bond with the baby. It is also the time for your partner to share this unique experience with you.

Most importantly, significant changes in the fetal movement pattern may help identify potential problems with your pregnancy before the baby's heart rate is affected.

Talk with your obstetrical provider about kick counting instructions.

3. What do we know about being aware of fetal movements?

Scientific studies over the last 40 years have shown that fetal movement is the best indicator of your baby's well-being. Learn more in the [white paper](#).

4. What is considered a high-risk pregnancy?

Some women are considered to have high-risk pregnancies requiring close monitoring because of certain medical and obstetrical conditions including:

- Post-term pregnancy
- Oligohydramnios or polyhydramnios (Too little or too much amniotic fluid)
- Fetal growth problems
- Multiple pregnancy (two or more fetuses)
- Placental problems

- Previous stillbirth
- High blood pressure
- Diabetes
- Kidney or heart disease

High-risk pregnancies are at risk for serious complications including stillbirth. By tracking and recording your baby's movement changes and alerting your obstetrician to these changes, tests can be performed to detect problems and timely interventions can be instituted.

5. My baby is always active, why should I do the kick count?

Setting aside time to count the kicks allows you time to rest and bond with your baby. Even when the baby is always active, daily counting will allow you to notice the significant difference in the baby's movement pattern. Your obstetrical provider can be notified of these changes to see whether further evaluation is warranted.

6. Why do I need to count my baby's kicks when I can hear their heartbeat with a Doppler device?

Kick counting allows you to monitor the baby's movements as an indicator of fetal well-being. The significant change in the fetal movement may identify potential problems **before** actual changes in the heart rate can be detected. By the time the heart slows or stops, it may be too late.

7. When do I start doing a kick count?

Kick count can be performed once a day during the time when your baby is most active. This is typically after meals, after physical activity, or in the evening.

Your obstetrical provider may ask you to start daily kick counting at 24 -26 weeks if you have a high risk pregnancy. Otherwise, kick counting can begin at 28 weeks in a normal pregnancy.

8. How do I perform a kick count?

There are different ways to do the kick count. Be sure discuss kick counting with your provider. One of the most common methods recommended by the American College of Obstetricians and Gynecologists (ACOG) is counting the time it takes for your baby to make 10 movements which include kicks, turns, twists, swishes, rolls and jabs. **Your baby should move 10 times in less than 2 hours.**

- Do the kick count **once a day**.
- Select a time of the day best suited for you when your baby is usually active. For most women, fetal movement typically peaks after meals, after activity, and in the evening.
- Do the kick count **roughly at the same time every day**.
- Get in a comfortable sitting or lying position. Relax and dedicate this time to feel your baby's precious movements.
- You may want to rest your or your partner's hands on your abdomen to feel the movements better. Your ability to feel the baby depends on the thickness of your abdominal wall, placental location, and your sensitivity to the movements.
- **Jot down the time** of the baby's first kick (movement) and the time of the 10th kick. Most of the babies will take much less than 30 minutes to complete 10 kicks.
- Since healthy babies have sleep cycles, your baby may not kick, or kick less than usual, or have less than 10 kicks in 2 hours. If so, wake up the baby by drinking fluid or by walking for 5 minutes. **Repeat the kick count.**
- **Contact your provider** or the labor and delivery room if there is still decreased fetal movement or if there is a significant change in the movements.
- Some providers may recommend that if there have not been 10 kicks in one hour, you should contact your provider for further evaluation.
- **Discuss with your provider** about kick counting instructions.

9. How can I record my kick counting sessions?

You can use the kickTrakT or you can jot down the time it takes to count 10 movements on a blank sheet of paper or a kick count chart.

10. What is considered normal kick count?

- Most healthy babies should take less than 2 hours for 10 kicks. Every baby is different.
- Keeping track of kick counting sessions will allow you to know what is "normal" for your baby.
- Notify your provider if your baby has not moved 10 times in 2 hours or the baby has sustained significant changes.

11. When do I contact my obstetrical provider?

- Call your provider if your baby has less than 10 movements in 2 hours.
- Call your provider if your baby has a significant or sudden change in movements.
- Do not wait for 24 hours when there is no fetal movement or significant changes in the movements.
- When in doubt, contact your provider.

12. Do babies kick less near the end of pregnancy?

NO! Towards the end of pregnancy, the baby may move differently, less kicks and more rolling. However, a kick count should take about the same time when it is done at the same time of the day when your baby is most active.

13. What should I do if I cannot feel my baby move?

If you cannot feel the baby move, drink a glass of juice or cold water or walk around for a few minutes then start counting again.

14. What would your provider do when you report decreased fetal movement?

Your provider may advise you to go to his/her office or to hospital for further fetal monitoring tests. The evaluation may include:

- **Ultrasound** - taking pictures from sound waves to evaluate the growth of the baby, amniotic fluid quantity, placenta, blood flow pattern etc.
- **Non stress test (NST)** -Baby's heart rate monitoring in response to its own movements
- **Biophysical profile (BPP)** -using an ultrasound exam with a non stress test (NST) to evaluate baby's heart rate, breathing, body movement, muscle tone, and amniotic fluid quantity
- **Contraction stress test (CST)** -Baby's heart rate monitoring in response to uterine contractions