



*South Eastman Health/Santé Sud-Est Inc.*

<b>No:</b> MC-D001	
<b>Approved By:</b> Ken Wersch Vice President Operations & Programs	<b>Source:</b> Regional Client Care Manual <b>Category:</b> Maternal Child
<b>New/Replaces:</b> <b>Date Approved:</b> October 12, 2000 <b>Reviewed:</b> <b>Revised:</b>	<b>Subject:</b> Precipitous Birth

### **POLICY**

1. When labour progresses so rapidly that a precipitous birth occurs or a woman is admitted to the hospital ready to give birth, the most experienced person available should assist the birth of the baby.
2. If a physician that has obstetrical privileges is in the hospital when the birth is eminent, that physician may be called to assist if the attending midwife or physician is not able to arrive in time.

### **PROCEDURE**

1. Stay with the woman, pull call bell for a nurse to assist in the preparation for the birth.
2. Assign someone to notify the physician or midwife.
3. Reassure and assist in positioning the woman for the birth.
4. Turn on suction, position it within reach.
5. Open tray and glove.
6. Calmly instruct woman to breathe through contractions.
7. With one hand flex the head, gently controlling its' advance. The other hand holds a sponge and is placed over the anus, exposing the perineum.
8. Slowly allow the head to advance until crowning occurs, instruct the woman to push gently between contractions as the head approaches crowning. As crowning occurs, gently extend the head with left hand, instruct the woman to breathe in and out.
9. Once the head is born, suction the mouth, then the nose. Quickly feel for nuchal cord. If one is present and loose, slip it over the head. If it is tight, double clamp with Kochers and cut between clamps.
10. Allow restitution and rotation of the head to occur.

11. With the next contraction, instruct the woman to push, place both hands on either side of the baby's head, apply firm traction towards the anus to assist birth of anterior shoulder. As anterior shoulder appears immediately lift the baby toward the symphysis pubis.
12. The second attendant prepares to give Syntocinon as ordered.
13. Deliver the baby onto the mother's abdomen, note time, suction, and dry baby with a towel.
14. Clamp and cut cord.
15. Ensure baby is well covered and observe closely for distress. Assign one minute apgar score.
16. Obtain cord blood.
17. Do not attempt to deliver placenta if you are not qualified to do so. Wait for signs of separation of placenta (the cord lengthens and a sudden gush of blood) and proceed to deliver placenta.
18. Clear away blood and inspect perineum for lacerations using gloved hands.
19. Inspect placenta and membranes for intactness.
20. Assign 5 minute apgar score.
21. Clear away soiled linen, place peri pad on perineum. Make mother comfortable.
22. Perform physical exam of the baby, perform initial set of vital signs, and wrap the infant in a warm blanket. Place baby on mother's abdomen or on the infant warmer as infant's condition warrants.
23. Check mother's fundus, flow, and vital signs. Massage fundus as needed to keep fundus firm.
24. Assist mother with breastfeeding.
25. Document on the labour record, delivery record, fetal monitoring strip, and delivery log.
26. Ensure that both mother and infant are wearing identabands with similar numbers.