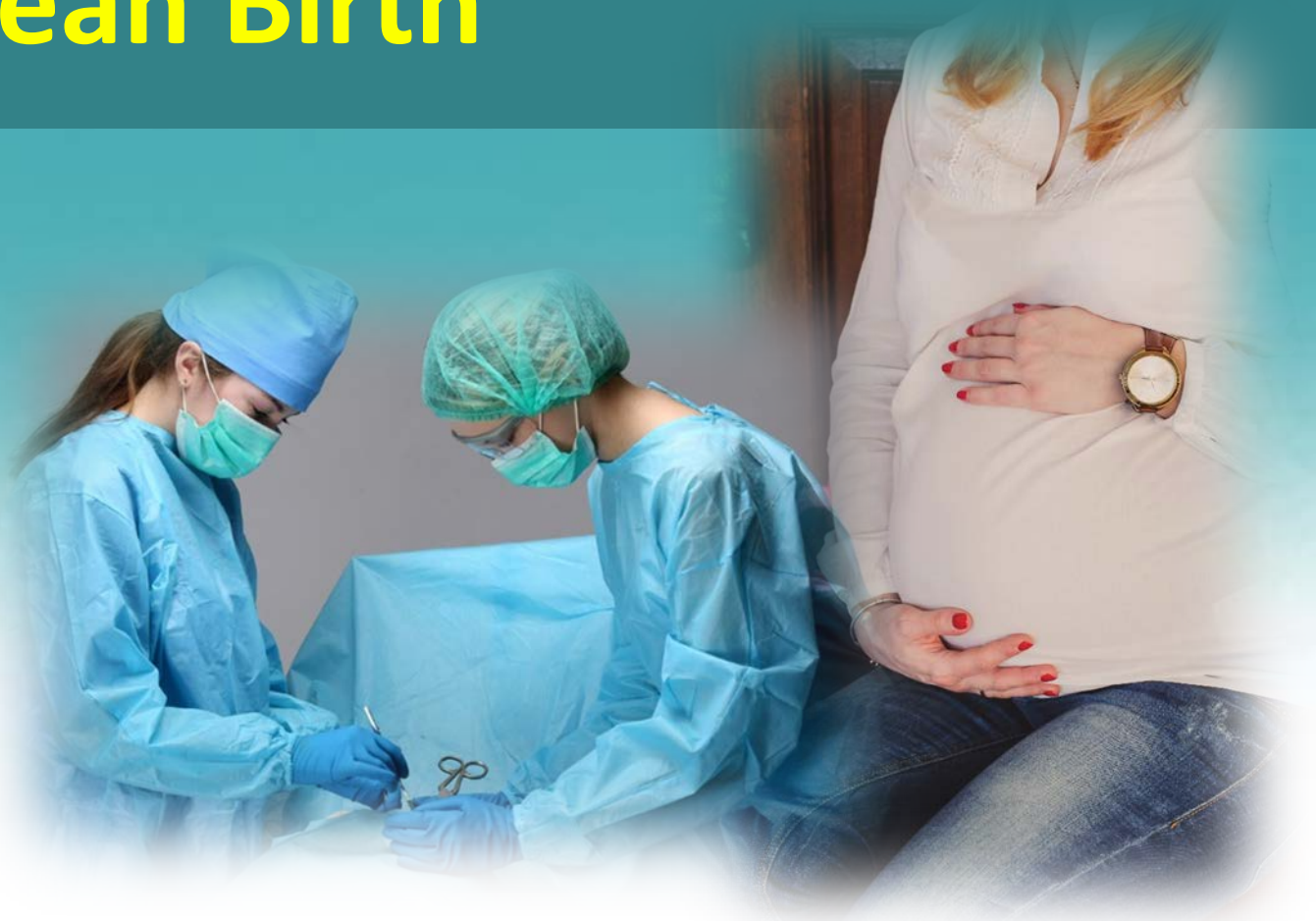
Best Start Resource Centre – Prenatal Education Program

Medical Interventions & Caesarean Birth



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Suney and Tara

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Informed Decision Making and Consent

- B - Benefits
- R - Risks
- A - Alternatives
- I - Intuition
- N – No/Not right now

Common Assessments During Labour

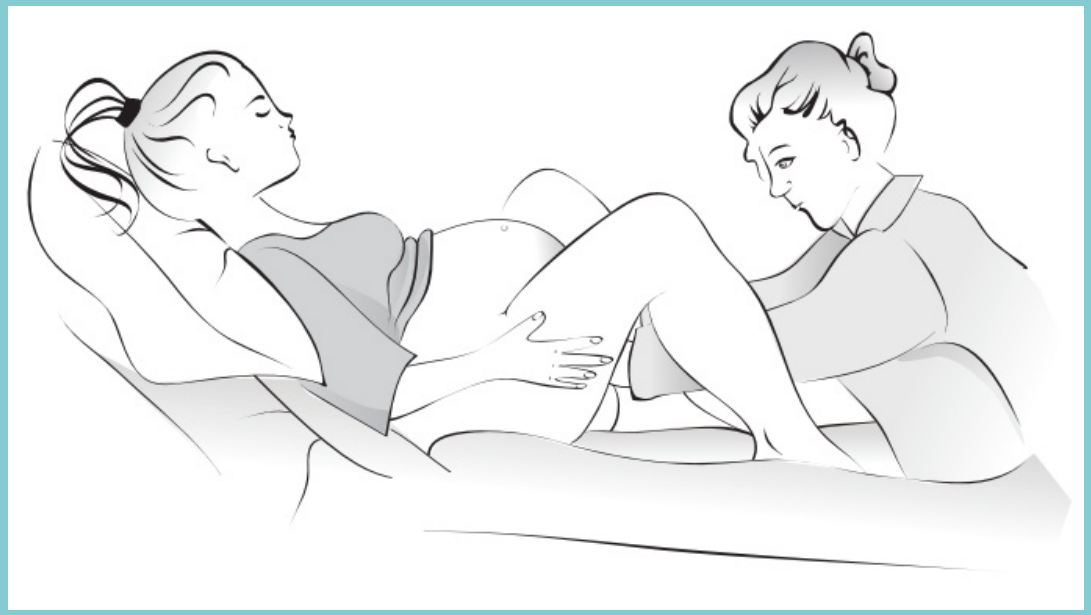
Assessment of:

- Vital signs
- Baby's heart rate
- Contractions
- Dilation of cervix

Listening to Baby's Heartbeat

- Intermittent monitoring using a handheld ultrasound
- Continuous monitoring using an Electronic Fetal Monitor

Membrane Sweep



Induction of Labour

- Cervical ripening
- Intravenous oxytocin
- Amniotomy

Improving Labour Progress

- Urinate often
- Walk
- Change position often

Intravenous Infusion

Used for:

- Medication delivery
- Epidural
- Rehydration

Pain Relief Options

Pain Relief Options

- Non-opioid analgesics
- Opioid analgesics
- Anesthetics

Nitrous Oxide

- Self-administered
- Only used during contractions
- Often used during transition, early pushing or while waiting for other pain relief

Epidurals and Spinals - Description

- Provide temporary pain relief
- Block sensation to uterus, abdominal area and lower back
- Can be used during labour and for Caesarean birth

Epidurals and Spinals - Procedure

- IV needed
- Lie on side or sit with back curved outward
- Area numbed with local anesthetic
- Test dose followed by full dose
- Best when connected to pump for continuous infusion

Epidurals and Spinals - Benefits and Risks

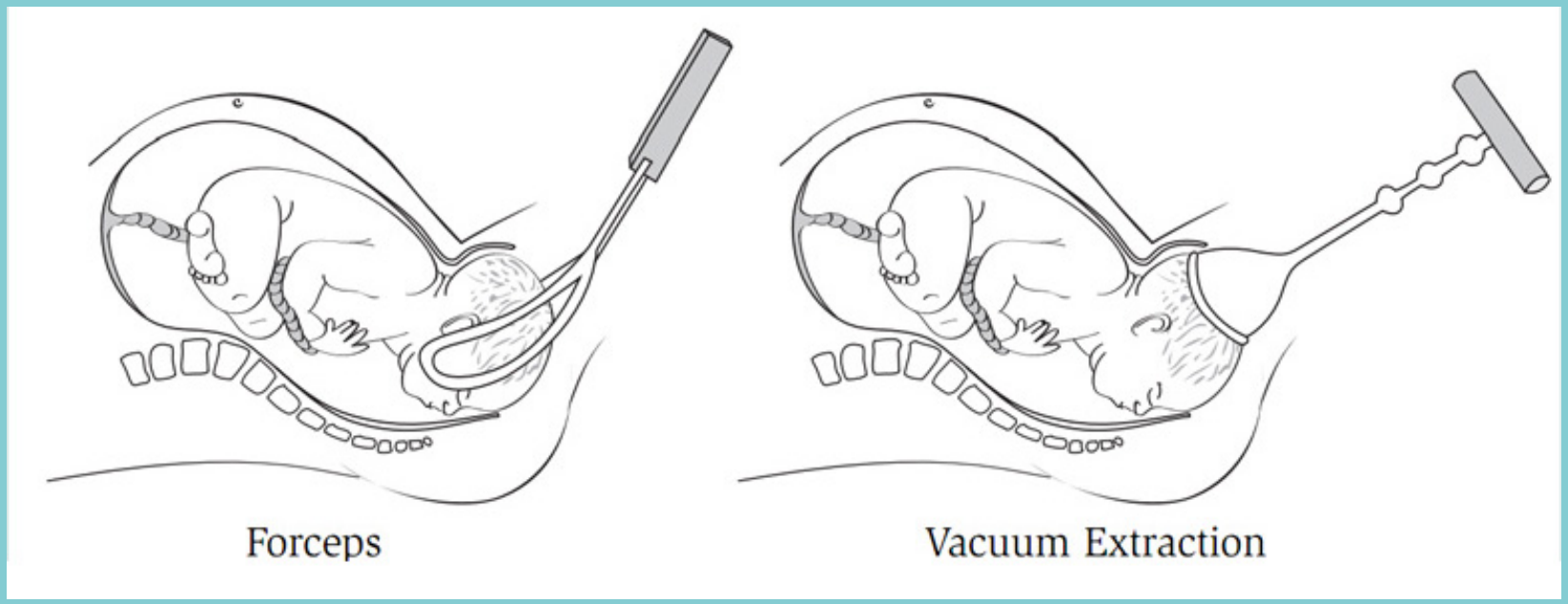
Benefits

- Most effective method of pain relief
- Allows the labouring woman to rest
- Allows her to be awake and alert
- Less risk of side effects for baby compared to narcotics

Risks/Side Effects

- Possible effects on the baby
- Breastfeeding challenges
- Decrease in blood pressure, possibly decreasing fetal heart rate
- Limited mobility
- Incomplete pain relief
- Headache
- Shivering
- Slowed labour
- Decreased ability to effectively push
- Etc.

Assisted Birth



- Forceps
- Vacuum Extraction
- Episiotomy

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Caesarean Birth - Why it may be needed

- Position of baby
- Placenta covering cervix
- Placenta not functioning well
- Multiple babies
- Genital herpes with symptoms
- HIV with high viral load
- High blood pressure or blood sugar
- Previous Caesarean birth

Caesarean Birth - Risks

- Risks for mother
- Risks for baby
- Ways to reduce risk

Caesarean Birth - Preparations

- Bloodwork
- Nothing to eat or drink
- Intravenous
- Anesthesia
- Urinary catheter

Caesarean Birth - What to Expect During Surgery

You may:

- Have your partner or support person present
- Be pain free
- Feel tugging or pressure
- Be in surgery for 1-2 hrs.
- Feel sleepy or shivery

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Caesarean Birth - What to Expect After Surgery

For baby

- Physical assessment
- Skin-to-skin
- Breastfeeding

For mother

- Physical assessment
- Transfer from operating room
- Return to regular diet
- Pain management
- Removal of catheter
- Gradual return to normal activities

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Medications, Caesarean Births and Breastfeeding

Birth Video

Birth Plan

BIRTH PLAN

We encourage you to write down your wishes and desires for the birth and to discuss these with your physician. (Use additional sheet, if necessary)

Your support People:

Your preferences about pain control:

Medical interventions during labour:

Second stage and delivery:

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Birth Plan

- Support people
- Pain control
- Medical interventions
- Second stage and birth

Birth Plan

- Most important issues
- Concerns or fears
- Infant feeding
- Newborn procedures

Additional Resources

- Hospital or birthing centre tour
- Health care provider
- Certified Doula
- Local public health unit
- Society of Obstetricians and Gynaecologists of Canada
- Childbirth Connection (U.S.A)
- Childbirth and Postpartum Professional Association (CAPPA)
- International Caesarean Awareness Network (ICAN)
- Lamaze International
- International Childbirth Education Association (ICEA)
- 40 reasons to go to the full 40
  www.health4mom.org/zones/go-the-full-40

The information represents the best practice guidelines at the time of publication. The content is not officially endorsed by the Government of Ontario. Consult your health care provider for information specific to your pregnancy.

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