



Childbirth

INDICATION	<ul style="list-style-type: none"> Imminent birth without sufficient time to make it to a receiving facility for delivery.
BLS	<ul style="list-style-type: none"> Follow General Medical Care M-01 for both mother and child. If assessment reveals abnormal presentation, e.g., prolapsed cord or breech / limb presentation, refer to Obstetric Emergencies M-14. Relevant conditions include nuchal cord, prolapsed cord, breech presentation, limb presentation, vaginal hemorrhage, seizures. Control the descent of the fully crowned head with your hand cupped over the cranium. Support the head as it delivers, If the cord is around the neck, if possible gently slip it over the head or across the shoulder,. <ul style="list-style-type: none"> If the cord is so tight that it can't be slipped over the head of the baby, clamp and cut between the clamps. This is only as a last resort once the cord is clamped, the baby is without an oxygen supply until it breathes on its own. When the head is delivered, it will rotate naturally to face laterally. Gently lower the head to deliver the anterior (upper) shoulder. When upper shoulder is delivered, gently raise the head to deliver the posterior (lower) shoulder. The body should then deliver smoothly. Dry, stimulate and wrap warmly. Prioritize warming measures to prevent neonatal hypothermia If infant does not cry vigorously or appears to be having difficulty clearing it's airway. <ul style="list-style-type: none"> Suction ONLY if secretions including meconium, causes airway obstruction If suctioning, always suction mouth first, then nares Clamp and cut the cord between the two clamps. Leave a minimum of 6 inches of cord from the umbilicus. There is no hurry to clamp the cord, but do not delay drying and wrapping baby. Document if the cord is cut by sterile or non-sterile equipment. Once baby is delivered and there are no signs of distress, refer to Newborn Care P-05. If there are signs of distress, refer to Neonatal Resuscitation P-04.
ALS	<ul style="list-style-type: none"> All specific ALS treatment is identified in General Medical Care M-01.
KEY CONCEPTS	<ul style="list-style-type: none"> If delivery will occur prior to arrival at the hospital, delay transport and assist delivery at the scene. The vast majority of deliveries are uncomplicated and require minimal assistance. The major life threats are of neonatal asphyxia and maternal hemorrhage.