Umbilical Cord Complications 4/5/6.12.5 Version 3, 01/2021 Cord complication Use a hands off approach unless Pre-alert hospital at earliest opportunity. there are complications. Emergency caesarean section may be Avoid touching cord. required for cord prolapse Avoid manipulation, traction and stimulation until baby is fully delivered Oxygen therapy Cord around Cord rupture Prolapsed cord baby's neck Mother to adopt Avoid excessive manipulation Apply additional clamps to cord and traction on the cord head down in left lateral position on either side of the rupture (hips higher than head) Hold presenting part off Apply direct pressure the cord using fingers, with sterile dressing rotate fingers as required Go to Childbirth CPG Minimal handing of cord and cover with sterile pad AP If prolonged transport time (> 15min) consider inserting an indwelling catheter into the bladder and run 500mL of NaCl into the bladder and clamp catheter Rapid transfer to Obstetrics unit To Obstetric unit

