

# **Actioncard Details of LangId: da5137d1-8492-4312-b444-8e4d4949a3c7**

**Description: Newborn Management Pediatric Drugs and Fluids**

**Chapter Key: pediatric-drugs\_1486735985488**

Card ID: 1

Master: Drug dose of common drugs for newborns below one month of age.

Adapted: Drug dose of common drugs for newborns below one month of age.

Translated: Posologie des médicaments les plus couramment administrés aux nouveau-nés de moins d'un mois.

Card ID: 2

Card ID: 4

Master: Ampicillin

Adapted: Ampicillin

Translated: Ampicilline

Card ID: 5

Master: Age: Under 7 days

Adapted: Age: Under 7 days

Translated: Âge: Moins de 7 jours

Card ID: 6

Master: Administration: IM/IV

Adapted: Administration: IM/IV

Translated: Administration: IM/IV

Card ID: 7

Master: Dose: 50 mg/kg/dose x 2

Adapted: Dose: 50mg/kg/dose x 2

Translated: Dose: 50mg/kg/dose x 2

Card ID: 46

Card ID: 9

Master: Age: Above 7 days

Adapted: Age: Above 7 days

Translated: Âge: Plus de 7 jours

Card ID: 10

Master: Administration: IM/IV

Adapted: Administration: IM/IV

Translated: Administration: IM/IV

Card ID: 11

Master: Dose: 50 mg/kg/dose x 3

Adapted: Dose: 50 mg/kg/dose x 3

Translated: Dose: 50 mg/kg/dose x 3

Card ID: 12

Card ID: 14

Master: Ceftriaxone

Adapted: Ceftriaxone

Translated: Ceftriaxone

Card ID: 15

Master: Administration: IM/IV

Adapted: Administration: IM/IV

Translated: Administration: IM/IV

Card ID: 16

Master: Dose: 50 mg/kg/dose x 2

Adapted: Dose: 50/kg/dose x 2

Translated: Dose: 50/kg/dose x 2

Card ID: 17

Master: OR

Adapted: OR

Translated: OU

Card ID: 18

Master: 100 mg/kg/dose x 1

Adapted: 100 mg/kg/dose x 1

Translated: 100 mg/kg/dose x 1

Card ID: 19

Card ID: 37

Master: Gentamicin

Adapted: Gentamycin

Translated: Gentamicin

Card ID: 21

Master: Age: Under 7 days

Adapted: Age: Under 7 days

Translated: Âge: Moins de 7 jours

Card ID: 22

Master: Weight: Below 2 kg

Adapted: Weight: Below 2 kg

Translated: Poids: Moins de 2 kg

Card ID: 23

Master: Administration: IM/IV

Adapted: Administration: IM/IV

Translated: Administration: IM/IV

Card ID: 24

Master: Dose: 3 mg/kg/dose x 1

Adapted: Dose: 3 mg/kg/dose x 1

Translated: Dose: 3 mg/kg/dose x 1

Card ID: 47

Card ID: 26

Master: Age: Under 7 days

Adapted: Age: Under 7 days

Translated: Âge: Moins de 7 jours

Card ID: 27

Master: Weight: Above 2 kg

Adapted: Weight: Above 2 kg

Translated: Poids: Plus de 2 kg

Card ID: 28

Master: Administration: IM/IV

Adapted: Administration: IM/IV

Translated: Administration: IM/IV

Card ID: 29

Master: Dose: 5 mg/kg/dose x 1

Adapted: Dose: 5 mg/kg/dose x 1

Translated: Dose: 5 mg/kg/dose x 1

Card ID: 48

Card ID: 31

Master: Age: Above 7 days

Adapted: Age: Above 7 days

Translated: Âge: Plus de 7 jours

Card ID: 32

Master: Dose: 7.5 mg/kg/dose x 1

Adapted: Dose: 7,5 mg/kg/dose x 1

Translated: Dose: 7,5 mg/kg/dose x 1

Card ID: 34

Card ID: 35

Master: Phenobarbital

Adapted: Phenobarbital

Translated: Phenobarbital

Card ID: 36

Master: Loading Dose

Adapted: Loading Dose

Translated: Dose de charge

Card ID: 38

Master: Administration: IM/IV/Oral

Adapted: Administration: IM/IV/Oral

Translated: Administration: IM/IV/voie orale

Card ID: 39

Master: Dose: 20 mg/kg/dose x 1

Adapted: Dose: 10 mg/kg/dose x 1

Translated: Dose: 10 mg/kg/dose x 1

Card ID: 51

Master: See Drug List

Adapted: See Drug List

Translated: See Drug List

## **Chapter Key: fluid-management\_1486736000649**

Card ID: 4

Master: Header!

Adapted: Header!

Translated: Header!

Card ID: 5

Master: BlueBerry!

Adapted: BlueBerry!

Translated: BlueBerry!

Card ID: 2



Age  
Fluid(accumulated oral: nasogastric tube or IV) 1 day  
60 ml/kg/day 2 days  
90 ml/kg/day 3 days  
120 ml/kg/day 4 days  
120 ml/kg/day 5 days  
150 ml/kg/day 6 days  
150 ml/kg/day 7 days - 1 month  
150-180 ml/kg/day

Card ID: 6

Card ID: 7

Master: One  
Two  
Three

Adapted: One  
Two  
Three

Translated: One  
Two  
Three

**Description: Newborn Management Danger Signs**

**Chapter Key: \_1486807614864**

Card ID: 1

Master: Airway

Adapted: Airways

Translated: Voies aériennes

Card ID: 2

Master: Free and safe (no obstruction).

Adapted: Free and safe (no obstruction)

Translated: Dégagées et sûres (pas d'obstruction).

Card ID: 3

Card ID: 4

Master: Breathing

Adapted: Breathing

Translated: Respiration

Card ID: 5

Master: Respiratory rate slower than 30 or faster than 60 per minute.

Adapted: Respiratory rate slower than 30 or faster than 60 per minute.

Translated: Fréquence respiratoire inférieure à 30 ou supérieure à 60 par minute.

Card ID: 6

Master: Cyanosis.

Adapted: Cyanosis.

Translated: Cyanose.

Card ID: 7

Master: Severe chest in-drawings.

Adapted: Severe chest in drawings.

Translated: Tirage sous-costal sévère.

Card ID: 8

Master: Grunting.

Adapted: Grunting.

Translated: Geignements.

Card ID: 9

Master: Apnoea (no breathing for more than 15 seconds).

Adapted: Apnoea (no breathing for more than 15 seconds).

Translated: Apnée (absence de respiration pendant plus de 15 secondes).

Card ID: 10

Card ID: 11

Master: Circulation

Adapted: Circulation

Translated: Circulation

Card ID: 12

Master: Signs of shock including:

Adapted: Signs of shock including:

Translated: Signes de choc dont :

Card ID: 13

Master: Pale colour.

Adapted: Pale color.

Translated: Pâleur.

Card ID: 14

Master: Weak pulse.

Adapted: Weak pulse.

Translated: Pouls faible.

Card ID: 15

Master: Heart rate below 80 or above 180.

Adapted: Heart rate below 80 or above 180.

Translated: Rythme cardiaque inférieur à 80 ou supérieur à 180.

Card ID: 16

Master: Capillary refill time more than 3 seconds.

Adapted: Capillary refill time more than 3 seconds.

Translated: Temps de remplissage capillaire supérieur à 3 secondes.

Card ID: 17

Card ID: 20

Master: Disability

Adapted: Disability

Translated: Incapacité

Card ID: 18

Master: Poor feeding/inability to suck.

Adapted: Poor feeding/inability to suck.

Translated: Difficulté à s'alimenter/ incapacité à téter.

Card ID: 21

Master: Irritability.

Adapted: Irritability.

Translated: Irritabilité.

Card ID: 22

Master: Convulsions.

Adapted: Convulsions.

Translated: Convulsions.

Card ID: 23

Master: Decreased muscle tone.

Adapted: Decreased muscle tone.

Translated: Tonus musculaire diminué.

Card ID: 24

Master: Decreased consciousness.

Adapted: Decreased consciousness.

Translated: Conscience diminuée.

Card ID: 25

Master: Vomiting.

Adapted: Vomiting.

Translated: Vomissement.

Card ID: 26

Card ID: 27

Master: Exposure

Adapted: Exposure

Translated: Exposition

Card ID: 28

Master: Temperature below 36.5°C or above 37.5°C.

Adapted: Temperature below 36.5°C or above 37.5°C.

Translated: Température inférieure à 36,5°C ou supérieure à 37,5°C.

Card ID: 29

Master: Red, tender umbilicus.

Adapted: Red, tender umbilicus.

Translated: Rougeur et sensibilité de l'ombilic.

Card ID: 30

Master: Severe jaundice.

Adapted: Severe jaundice.

Translated: Jaunisse sévère.

## **Description: Newborn Management Management of Danger Signs**

### **Chapter Key: \_1486808279407**

Card ID: 1

Master: CALL FOR HELP!

Adapted: CALL FOR HELP!

Translated: APPELEZ À L'AIDE!

Card ID: 2

Card ID: 3

Master: Airway

Adapted: Airway

Translated: Voies aériennes

Card ID: 4

Master: Position so airway is free. Suction if obstructed.

Adapted: Position so free. Suction if obstructed.

Translated: Les voies aériennes doivent être dégagées. Aspirez en cas d'obstruction.

Card ID: 5



Card ID: 6

Master: Breathing

Adapted: Breathing

Translated: Respiration

Card ID: 7

Master: If no breathing, rub the back for 10 seconds.

Adapted: If no breathing, rub the back for 10 seconds.

Translated: En cas d'apnée, stimulez en lui frottant le dos pendant 10 secondes.

Card ID: 8

Master: If still no breathing or respiratory rate slower than 30 per minute: Start bag and mask ventilation.

Adapted: If still no breathing or respiratory rate slower than 30 per minute: Start bag and mask ventilation.

Translated: Si l'enfant ne respire toujours pas ou si sa fréquence respiratoire est inférieure à 30 par minute : Commencez la ventilation par masque et ballon.

Card ID: 24

Master: If the colour is bluish or the newborn is having difficulty breathing with indrawings or grunting give oxygen by nasal catheter or prongs.

Adapted: If the color is bluish or the newborn is having difficulty breathing with indrawings or grunting give oxygen by nasal catheter or prongs.

Translated: Si la couleur est bleutée ou si le nouveau-né a de la difficulté à respirer ou s'il geint, donnez de l'oxygène par cathether or canule nasale.

Card ID: 10

Card ID: 9

Master: Circulation

Adapted: Circulation

Translated: Circulation

Card ID: 20

Master: If signs of shock give normal saline 10 ml/kg IV.

Adapted: If signs of shock give normal saline 10-15 ml/kg IV.

Translated: En cas de signes de choc, traitez par thérapie hydrique, 10-15 ml/kg de sérum physiologique en IV.

Card ID: 19

Master: Disability

Adapted: Disability

Translated: Incapacité

Card ID: 11

Master: If the newborn is drowsy, unconscious or convulsing:

Adapted: If the newborn is drowsy, unconscious or convulsing:

Translated: En cas de somnolence, inconscience ou convulsions :

Card ID: 12

Master: Measure blood glucose. If you cannot measure, assume low blood sugar and treat.

If blood glucose is below 2.2 give Glucose 10% 2 ml/kg IV.

Alternatively give expressed breast milk 10 ml/kg by nasogastric tube.

If convulsions last more than 3 minutes or are brief serial seizures, give Phenobarbital 20 mg/kg IM/IV.

Adapted: Measure blood glucose. If you cannot measure, assume low blood sugar and treat.

If blood glucose is below 2.2 give Glucose 10% 2 ml/kg IV.

Alternatively give expressed breast milk 10 ml/kg by nasogastric tube.

If convulsions last more than 3 minutes or are brief serial seizures, give Phenobarbital 20 mg/kg IM/IV.

Translated: Mesurez la glycémie. Si vous ne pouvez pas la mesurer, traitez sur la base d'une glycémie basse.

Si le taux est inférieur à 2,2 administrez 2 ml/kg de glucose 10% en IV.

L'alternative est de donner du lait maternel tiré ou 10 ml/kg de glucose par sonde naso-gastrique.

Si les convulsions durent plus de 3 minutes ou s'il s'agit d'une série de convulsions brèves, traitez avec 20 mg/kg de phénobarbital en IV/IM.

Card ID: 13

Master: See drug list for further treatment.

Adapted: Repeat if necessary.

Translated: Répétez le cas échéant.

Card ID: 14

Card ID: 21

Master: Exposure

Adapted: Exposure

Translated: Exposition

Card ID: 22

Master: Reheat the newborn, if axillary temperature below 36.5 C  
Confirm severe jaundice with a bilirubin measurement and treat with phototherapy. If not available: Refer to facility with advanced care.

Adapted: Reheat the newborn, if axillary temperature below 36,5 C  
Confirm severe jaundice with a bilirubin measurement and treat with phototherapy. If not available: Refer to facility with advanced care.

Translated: Réchauffer le nouveau-né, si la température axillaire est inférieure à 36,5 C  
Confirmer la jaunisse sévère avec une mesure de la bilirubine et traiter avec la photothérapie. Si non disponible: Renvoyez à une établissement à soins avancés.

Card ID: 15

Master: At any danger sign; suspect severe infection (sepsis or meningitis):

Adapted: At any danger sign; suspect severe infection (sepsis or meningitis)

Translated: Au moindre signe de danger, pensez à une infection sévère (septicémie ou méningite)

Card ID: 16

Master: Give antibiotics Ampicillin and Gentamicin IV/IM according to age and weight.

Adapted: Give antibiotics Ampicillin and Gentamycin IV/IM according to age and weight.

Translated: Administrez des antibiotiques, Ampicilline et Gentamicine en IV/IM en fonction de l'âge et du poids.

Card ID: 17

Master: If no improvement after 2 days, change to broader antibiotics, Ceftriaxone.

Adapted: If no improvement after 2 days, change to broader antibiotics, Ceftriaxone.

Translated: Si aucune amélioration n'a lieu après 2 jours, administrez des antibiotiques à large spectre, Ceftriaxone.

## **Description: Newborn Management Prevention**

### **Chapter Key: \_1486813171298**

Card ID: 21

Master: Respiratory Distress

Adapted: Respiratory Distress

Translated: Détresse respiratoire

Card ID: 5

Master: At labour between 24 and 34 gestational weeks or estimated birth weight below 2 kg give the mother Betamethasone 12 mg IM twice.

Adapted: At labor before 24 and 34 gestational weeks or estimated birth weight below 2 kg give the mother Betamethasone 12 mg IM twice

Translated: Pour un accouchement entre 24 à 34 semaines de gestation, ou un poids de naissance estimé inférieur à 2 kg, administrez 12 mg de bétaméthasone en IM deux fois

Card ID: 7

Master: OR

Adapted: OR

Translated: OU

Card ID: 8

Master: Dexamethasone 6 mg four times, 12 hours apart.

Adapted: Dexamethasone 6 mg four times, 12 hours apart.

Translated: 6 mg de dexaméthasone quatre fois à 12 heures d'intervalle.

Card ID: 9

Card ID: 22

Master: Severe Infection

Adapted: Severe Infection

Translated: Infection sévère

Card ID: 11

Master: If membranes rupture before gestational week 37 or more than 18 hours before delivery.

Adapted: If membranes ruptures before gestational week 37 or more than 18 hours before delivery.

Translated: Si les membranes se sont rompues avant 37 semaines de gestation ou plus de 18 heures avant l'accouchement

Card ID: 12

Master: OR

Adapted: OR

Translated: OU

Card ID: 13

Master: If fever is higher than 38- $\mu$ 2 &V`ore or during delivery.

Adapted: If fever is higher than 38- $\mu$ 2 &V`ore or during delivery.

Translated: Fièvre supérieure à 38°C avant ou pendant l'accouchement.

Card ID: 24

Master: OR

Adapted: OR

Card ID: 25

Master: If amniotic fluid is purulent or foul smelling.

Adapted: If amniotic fluid is purulent or foul smelling

Card ID: 26

Master: OR

Adapted: OR

Card ID: 27

Master: If the mother has documented colonisation with group B streptococcus:

Adapted: If she has documented colonization with Group B Streptococcus:

Card ID: 14

Master: Give her Ampicillin 2 g IV every 6 hours.

Adapted: Give the mother Ampicillin 2 g IV every 6 hour.

Translated: Administrez à la mère 2g d'ampicilline en IV toutes les 6 heures

Card ID: 15

Master: AND

Adapted: AND

Translated: ET

Card ID: 28

Master: Give the newborn Ampicillin 50 mg/kg IV/IM twice daily and Gentamicin 5 mg/kg IV/IM once daily for at least two days.

Adapted: Give the newborn Ampicillin 50 mg/kg IV or IM twice daily and Gentamycin 5 mg/kg IV or IM once daily for at least two days.

Translated: Administrez au nouveau-né de l'ampicilline et de la gentamicine pendant minimum 2 jours.

Card ID: 29

Master: If the mother has HIV, hepatitis B, syphilis or tuberculosis follow national guidelines for treatment of the newborn.

Adapted: If the mother has HIV, Hepatitis B, Syphilis or tuberculosis follow national guidelines for treatment of the newborn.



Card ID: 17

Card ID: 23

Master: Low Blood Sugar

Adapted: Low Blood Sugar

Translated: Hypoglycémie

Card ID: 19

Master: If a newborn has asphyxia or danger signs:

Adapted: If newborn with asphyxia or danger signs:

Translated: En cas d'asphyxie du nouveau-né ou de signes de danger :

Card ID: 20

Master: Keep the newborn warm by skin to skin contact with the mother.  
Start breastfeeding within half an hour and feed every 2 hours.  
If unable to suck give expressed milk 10 ml/kg in a cup or by nasogastric tube.  
If not possible or the newborn vomits give glucose 10% according to the Action Card "Fluid management" under "Paediatric drugs and fluids".

Adapted: Keep the newborn warm by skin to skin contact with the mother.  
Start breastfeeding within half hour and feed every 2 hours.  
If unable to suck give expressed milk 10 ml/kg in a cup or by nasogastric tube.  
If not possible or the newborn vomits give Glucose 10% 5 ml/kg/hour IV.

Translated: Maintenez la température du nouveau-né par un contact peau à peau avec la mère.

Commencez l'allaitement dans la demi-heure et nourissez toutes les 2 heures.  
S'il ne peut pas téter, donnez-lui 10 ml/kg de lait maternel tiré dans une tasse ou par sonde naso-gastrique.

En cas d'impossibilité ou si le nouveau-né vomit administrez 5ml/kg/heure de glucose 10% en IV.

## Description: Hypertension Definitions

### Chapter Key: \_1486814147474

Card ID: 3

Master: Severe Preeclampsia is one of the following:

Adapted: Severe Preeclampsia is one of the following:

Translated: La pré-éclampsie sévère se caractérise par l'un de ces symptômes :

Card ID: 23

Master: Severely elevated blood pressure (160 mmHg or higher systolic OR 110 mmHg or higher diastolic), OR

Persistent severe headache OR

Visual disturbances like flashing lights or blurry vision, OR

Persistent upper abdominal pain, OR

Respiratory distress that could be caused by pulmonary oedema, OR

Decreased urine production (less than 30 ml per hour).

Adapted: Severely elevated blood pressure (160 mmHg or higher systolic OR 110 mmHg or higher diastolic), OR

Persistent severe headache

Visual Disturbances like flashing lights or blurry vision, OR

Persistent upper abdominal pain, OR

Respiratory distress that could be caused by pulmonary edema, OR

Decreased urine production (less than 30 ml per hour).

Translated: Tension artérielle sévèrement élevée (160 mmHg ou tension systolique plus élevée ou 110 mmHg ou tension diastolique plus élevée) OU

Céphalées intenses et continues OU

Troubles visuels type éclairs de lumière ou vision floue OU

Douleur abdominale haute continue OU

Détresse respiratoire pouvant être causée par un œdème pulmonaire OU

Production diminuée d'urine (moins de 30 ml par heure).

Card ID: 17

Card ID: 24

Master: Eclampsia is when a pregnant woman develops generalised seizures.

Adapted: Eclampsia is when a pregnant woman develops generalized seizures.

Translated: Il y a éclamptie quand une femme enceinte est prise de convulsions généralisées.

Card ID: 19

Master: Usually these women suffer from preeclampsia though 10-20% of women with eclampsia have a normal blood pressure.

Adapted: Usually these women suffer from preeclampsia though 10-20% of women with eclampsia have a normal blood pressure.

Translated: Généralement, ces femmes souffrent de pré-éclamptie même si 10 à 20% des femmes présentant une éclamptie ont une tension artérielle normale.

Card ID: 20

Master: Consider as differential diagnosis cerebral malaria or meningitis where fever will be present.

Adapted: Consider as differential diagnosis cerebral malaria or meningitis where fever will be present.

Translated: En cas de fièvre, envisagez un diagnostique différentiel tel que le neuropaludisme ou la méningite.

## **Description: Hypertension Management Eclampsia**

**Chapter Key: \_1486815218676**

Card ID: 1

Master: Call for help!

Adapted: Call for help!

Translated: APPELEZ À L'AIDE!

Card ID: 19

Master: Check Airway and Breathing.

Fits are self-limiting; while convulsing, prevent the woman from trauma and turn her on the left side.

Insert IV lines.

Give Magnesium Sulphate. As a loading dose you give; 4 g in a 20% solution IV SLOWLY over 20 minutes.

Adapted: Check Airway and Breathing.

Fits are self-limiting; while convulsing, prevent the woman from trauma and turn her on the left side.

Insert IV lines.

Give Magnesium Sulphate. As a loading dose you give; 4g in a 20% solution IV SLOWLY over 20 minutes.

Translated: Contrôlez les voies aériennes et la respiration

Les crises sont spontanément résolutive ; placez la femme en convulsion sur le côté pour prévenir les traumatismes.

Posez une intraveineuse.

Administrez le sulfate de magnésium. La dose de charge est de 4g dans une solution 20% en IV LENTEMENT pendant 20 minutes.

Card ID: 5

Master: (Ideally you mix it with for example 100 ml. normal saline running 3 drops per second).

Adapted: (Ideally you mix it with for example 100 ml. normal saline running 3 drops per second).

Translated: (Vous pouvez mélanger par exemple avec 100 mL de sérum physiologique, débit de 3 gouttes par seconde).

Card ID: 6

Master: Never give Magnesium Sulphate intravenously fast, as this causes heart arrest!

Adapted: Never give Magnesium Sulphate intravenously fast, as this causes heart arrest!

Translated: N'administrez jamais de MgSO<sub>4</sub> en intraveineuse rapidement, car cela peut causer un arrêt cardiaque !

Card ID: 10

Master: If no signs of toxicity, proceed directly to giving the first maintenance dose of Magnesium Sulphate; 2 doses of 5 g IM (50% solution) one in each buttock (You can add 1 ml. 2% lidocaine for pain relief).

Adapted: If no signs of toxicity, proceed directly to giving the first maintenance dose of Magnesium Sulphate; 2 doses of 5g IM (50% solution) one in each buttock (You can add ½ ml. 2% lidocaine for pain relief).

Translated: Si aucun signe de toxicité n'apparaît, administrez la première dose d'entretien de sulfate de magnésium ; 2 doses de 5g IM (solution 50%) dans chaque fesse (vous pouvez ajouter ½ mL lidocaïne 2% pour soulager la douleur).

Card ID: 11

Master: See drug list for more details.

Adapted: See drug list for more details.

Translated: Consultez la liste des médicaments pour plus de détails.

Card ID: 12

Master: Beware of toxicity

Adapted: Beware of toxicity

Translated: Surveillez la toxicité !

Card ID: 13

Master: The first sign is loss of tendon reflexes; a more severe sign is respiratory depression with a respiratory rate of  $< 12$  per minute.

Adapted: The first sign is loss of tendon reflexes; a more severe sign is respiratory depression with a respiratory rate of  $< 12$  per minute.

Translated: Le premier signe en est la perte des réflexes tendineux ; un signe plus grave est la dépression respiratoire avec une fréquence respiratoire  $< 12$  par minute.

Card ID: 14

Master: Then you don't give the intramuscular dose of Magnesium Sulphate.

Adapted: Then you don't give the intramuscular dose of Magnesium Sulphate.

Translated: Dans ce cas, n'administrez pas la dose intramusculaire de sulfate de magnésium.

Card ID: 15

Master: At a respiratory rate of  $< 12$  per minute you give the antidote Calcium Gluconate 1 g IV over three minutes.

Adapted: At a respiratory rate of  $< 12$  per minute you give the antidote Calcium Gluconate 1g IV over three minutes.

Translated: En cas d'une fréquence respiratoire  $< 12$  par minute, vous administrez l'antidote Calcium Gluconate 1g IV pendant trois minutes.

Card ID: 20

Master: At heart arrest give the antidote IV push.

Adapted: At heart arrest give the antidote IV push.

Translated: En cas d'arrêt cardiaque, injectez en bolus IV l'antidote.

## **Description: Hypertension Management Hypertension**

### **Chapter Key: bp-140-15090100\_1486816049815**

Card ID: 1

Master: If no signs of severe preeclampsia (see definitions):

Adapted: If no signs of severe preeclampsia (see definitions):

Translated: Si aucun signe de pré-éclampsie sévère (cf. définitions) :

Card ID: 2

Master: Send home.

Adapted: Send home.

Translated: Renvoyez la femme chez elle.

Card ID: 3

Master: Schedule follow up appointment in 3-4 days, instruct in danger signs.

Adapted: Schedule follow up appointment in 3-4 days, instruct in danger signs.

Translated: Programmez un rendez-vous de suivi 3 à 4 jours plus tard après l'avoir informée des signes avant-coureurs.

Card ID: 4

Master: Plan delivery at referral facility, induction of labour at gestational age of 38-39 weeks if this procedure is performed and if gestational age is known.

Adapted: Plan delivery at referral facility, induction of labor at gestational age 38-39 if this procedure is performed and if gestational age is known.

Translated: Préparez un transport vers un hôpital central pour un déclenchement du travail à l'âge gestationnel de 38-39 semaines, si cette procédure est possible et si l'âge gestationnel est connu.

## **Chapter Key: bp-150-160100110\_1486816264206**

Card ID: 1

Master: Admit and observe.

Adapted: Admit and observe.

Translated: Hospitalisez et gardez en observation.

Card ID: 2

Master: Assess BP every 8 hours.

Adapted: Assess BP every 8 hours.

Translated: Mesurez la TA toutes les 8 heures.

Card ID: 3

Master: If high blood pressure persists start oral antihypertensives for example:

Adapted: If high blood pressure persists start oral antihypertensives for example:

Translated: Si la tension artérielle persiste, démarrez un traitement



d'antihypertenseurs par voie orale, par exemple :

Card ID: 4

Master: Labetatol starting dose: 200 mg orally every 6-12 hours

Adapted: Labetatol starting dose: 200 mg orally every 6-12 hours

Translated: Labétatol, dose de départ : 200 mg par voie orale toutes les 6-12 heures

Card ID: 5

Master: OR

Adapted: OR

Translated: OU

Card ID: 6

Master: Methyldopa starting dose: 250 mg orally every 6-8 hours.

Adapted: Methyldopa starting dose: 250 mg orally every 6-8 hours.

Translated: Methyldopa, dose de départ : 250 mg par voie orale toutes les 6-8 heures.

Card ID: 11

Master: See drug list for more details.

Adapted: See drug list for more details.

Translated: Consultez la liste des médicaments pour plus de détails.

Card ID: 7

Card ID: 8

Master: If blood pressure is reduced to between 140-150 systolic and 90-100 diastolic AND if there are no signs of severe preeclampsia (see definitions), the patient can be sent home.

Adapted: If blood pressure is reduced to between 140-150 systolic and 90-100 diastolic AND if there are no signs of severe preeclampsia (see definitions), the patient can be sent home.

Translated: Si la tension artérielle est entre 140-150 systolique et 90-100 diastolique ET qu'il n'y a aucun autre signe de pré-éclampsie sévère (voir définitions), la patiente peut être renvoyée chez elle.

Card ID: 9

Master: Schedule follow up appointment in 3-4 days, instruct in danger signs.

Adapted: Schedule follow up appointment in 3-4 days, instruct in danger signs.

Translated: Programmez un rendez-vous de suivi 3 à 4 jours plus tard après l'avoir informée des signes avant-coureurs.

Card ID: 10

Master: Plan for delivery at referral facility, induction of labour at gestational age 38-39 if this procedure is performed and if gestational age is known.

Adapted: Plan for delivery at referral facility, induction of labor at gestational age 38-39 if this procedure is performed and if gestational age is known.

Translated: Préparez un transport vers un hôpital central pour un déclenchement du travail à l'âge gestationnel de 38-39 semaines, si cette procédure est possible et si l'âge gestationnel est connu.

## **Chapter Key: severe-preeclampsia\_1486816564029**

Card ID: 1

Master: See definitions.

Adapted: See definitions.

Translated: Voir définitions.

Card ID: 2

Master: Admit and treat.

Adapted: Admit and treat.

Translated: Hospitalisez et traitez.

Card ID: 3

Master: The single most important aim is to keep systolic BP below 160 mmHg!

Adapted: The single most important aim is to keep systolic BP below 160 mmHg!

Translated: Le plus important est de maintenir la TA systolique en dessous de 160 mmHg !

Card ID: 4

Master: Insert indwelling urine catheter.

Adapted: Insert indwelling urine catheter.

Translated: Introduisez une sonde urinaire à demeure.

Card ID: 5

Master: Monitor each ½ hour until stable, then each 8 hours:

Adapted: Monitor each ½ hour until stable, then each 8 hours:

Translated: Surveillez toutes les ½ heures jusqu'à stabilisation, puis toutes les 8 heures :

Card ID: 6

Master: Fluid balance  
Respiratory rate  
Blood pressure  
Tendon reflexes  
Foetal heart rate

Adapted: Fluid balance  
Respiratory rate  
Blood pressure  
Tendon reflexes  
Fetal heart rate

Translated: Équilibre hydrique  
Fréquence respiratoire  
Pression artérielle  
Réflexes tendineux  
Rythme cardiaque fœtal

Card ID: 7

Master: If severe features persist: Plan referral for delivery within 24 hours.

Adapted: If severe features persist: Plan referral for delivery within 24 hours.

Translated: Si ces symptômes persistent à un niveau sévère, préparez un transport vers un hôpital central dans les 24 heures.

Card ID: 8

Card ID: 27

Master: Managing Blood Pressure

Adapted: Managing Blood Pressure

Translated: Prise en charge de la tension artérielle

Card ID: 10

Master: At blood pressure between 150-160/100-110 start oral antihypertensives for example:

Adapted: At blood pressure between 150-160/100-110 start oral antihypertensives for example:

Translated: Si la tension artérielle est entre 150-160/100-110 démarrez un traitement d'antihypertenseurs par voie orale, par exemple :

Card ID: 11

Master: Labetatol starting dose: 200 mg orally every 6-12 hours.

Adapted: Labetatol starting dose: 200 mg orally every 6-12 hours.

Translated: Labétatol, dose de départ : 200 mg par voie orale toutes les 6-12 heures.

Card ID: 12

Master: OR

Adapted: OR

Translated: OU

Card ID: 13

Master: Methyldopa starting dose: 250 mg orally every 6-8 hours.

Adapted: Methyldopa starting dose: 250 mg orally every 6-8 hours.

Translated: Methyldopa, dose de départ : 250 mg par voie orale toutes les 6-8 heures.

Card ID: 14

Master: Persisting blood pressure  $\geq$  160 syst. or  $\geq$  110 diastolic must be treated IV.

Adapted: Persisting blood pressure  $\geq$  160 syst. or 110 diastolic must be treated IV.

Translated: Tension artérielle persiste  $\geq$  160 systolique ou 110 diastolique traitez par IV.

Card ID: 15

Master: See drug list for more details.

Adapted: See drug list for more details.

Translated: Consultez la liste des médicaments pour plus de détails.

Card ID: 16

Master: Assess the BP every 15 minutes and treat IV according to the suitable antihypertensives in the drug list until the BP is below 160/110.

Adapted: Assess blood pressure every 15 minutes.

Translated: Mesurez la tension artérielle toutes les 15 minutes.

Card ID: 18

Master: See drug list for more details.

Adapted: See drug list for more details.

Translated: Consultez la liste des médicaments pour plus de détails.

Card ID: 28

Master: Prevention of Eclampsia

Adapted: Prevention of Eclampsia

Translated: Prévention de l'éclampsie

Card ID: 20

Master: Give loading dose Magnesium Sulphate 4 gr IV Slowly over 20 minutes (Ideally you mix it with for example 100 ml normal saline running 3 drops per second).

Adapted: Give loading dose Magnesium Sulphate 4 gr IV Slowly over 20 minutes (Ideally you mix it with for example 100 ml normal saline running 3 drops per second).

Translated: Administrez la dose de charge Sulfate de magnésium 4 gr IV lentement sur 20 minutes (Vous pouvez mélanger par exemple avec 100 ml de sérum physiologique, débit de 3 gouttes par seconde).

Card ID: 21

Master: If normal tendon reflexes and breathing:

Adapted: If normal tendon reflexes and breathing:

Translated: Si la respiration et les réflexes tendineux sont normaux :

Card ID: 29

Master: Proceed directly to giving maintenance dose Magnesium Sulphate 5 gr 50% solution IM in each buttock (You can add 1 ml. 2% lidocaine for pain relief).

Adapted: Proceed directly to giving maintenance dose Magnesium Sulphate 5 gr 50% solution IM in each buttock (You can add ½ ml. 2% lidocaine for pain relief).

Translated: Administrez la dose d'entretien de sulfate de magnésium 5 gr solution 50% IM dans chaque fesse (Vous pouvez ajouter ½ mL lidocaïne 2% pour soulager la douleur).

Card ID: 22

Master: See drug list for more details.

Adapted: See drug list for more details.

Translated: Consultez la liste des médicaments pour plus de détails.

Card ID: 23

Master: Never give Magnesium Sulphate intravenously fast, as this causes cardiac arrest!

Adapted: Never give Magnesium Sulphate intravenously fast, as this causes cardiac arrest!

Translated: N'administrez jamais le sulfate de magnésium en intraveineuse rapidement, car cela peut causer un arrêt cardiaque !

Card ID: 24

Master: Beware of toxicity!

Adapted: Beware of toxicity!

Translated: Surveillez la toxicité !



Card ID: 25

Master: The first sign is loss of tendon reflexes; a more severe sign is respiratory depression with a respiratory rate < 12 per minute.

Adapted: The first sign is loss of tendon reflexes; a more severe sign is respiratory depression with a respiratory rate < 12 per minute.

Translated: Le premier signe en est la perte des réflexes tendineux ; un signe plus grave est la dépression respiratoire avec une fréquence respiratoire < 12 par minute.

Card ID: 26

Master: Then you don't give the intramuscular dose of Magnesium Sulphate. Instead you give the antidote Calcium Gluconate 1 gr. IV over three minutes.

Adapted: Then you don't give the intramuscular dose of Magnesium Sulphate. Instead you give the antidote Calcium Gluconate 1 gr IV.

Translated: Dans ce cas, n'administrez pas la dose intramusculaire de sulfate de magnésium. Á la place, vous administrez l'antidote Calcium Gluconate 1 gr en IV.

Card ID: 30

Master: At heart arrest you give the antidote IV push.

Adapted: At heart arrest you give the antidote IV push.

Translated: En cas d'arrêt cardiaque, injectez en bolus IV l'antidote.

## **Description: Maternal Sepsis Definitions**

**Chapter Key: \_1486838311746**

Card ID: 1

Master: Sepsis is diagnosed if there is a reasonable suspicion of infection and two of the following findings:

Adapted: Sepsis is diagnosed if there is a reasonable suspicion of infection and two of the following findings:

Translated: La septicémie est diagnostiquée si la patiente présente des signes d'infection et deux des signes suivants :

Card ID: 2

Master: Pulse above 90  
Respiratory rate of 20 or higher  
Temperature above 38-°C GFVçF-öã

Adapted: Pulse above 90  
Respiratory rate of 20 or higher  
Temperature above 38-°C GFVçF-öã

Translated: Pouls supérieur à 90  
Rythme respiratoire de 20 ou plus  
Température supérieure à 38°C - Attention:

Card ID: 7

Master: Maternal sepsis often causes fever but not necessarily.

Adapted: Maternal sepsis often causes fever but not necessarily.

Translated: La septicémie maternelle provoque souvent de la fièvre mais pas nécessairement.

Card ID: 8

Master: A septic woman can have an increased temperature, normal temperature or low temperature.

Adapted: A septic woman can have an increased temperature, normal temperature or

low temperature.

Translated: Une femme avec septicémie peut avoir une température haute, une température normale ou basse.

Card ID: 9

Card ID: 3

Master: Septic Shock is diagnosed at the following findings despite adequate fluid resuscitation;

Adapted: Septic Shock is diagnosed at the following findings despite adequate fluid resuscitation;

Translated: Un choc septique est diagnostiqué avec les critères suivants malgré une réanimation liquidienne adéquate :

Card ID: 4

Master: Systolic blood pressure below 90, OR;  
Urine output below 30 ml per hour

Adapted: Systolic blood pressure below 90, OR;  
Urine output below 30 ml per hour

Translated: Tension artérielle systolique inférieure à 90 mm Hg, OU;  
Diurèse inférieure à 30 ml par heure.

## **Description: Maternal Sepsis Emergency Management**

**Chapter Key: \_1486839161711**

Card ID: 28

Master: At signs of septic abortion or at excessive vaginal bleeding

Adapted: At signs of septic abortion or at excessive vaginal bleeding

Translated: En cas de signe d'avortement septique ou d'hémorragie vaginale excessive

Card ID: 30

Master: Evacuation of the uterus must be performed with no delay.

Adapted: Evacuation of the uterus must be performed with no delays

Translated: L'évacuation de l'utérus doit avoir lieu sans délai!

Card ID: 31

Master: Do not delay by awaiting  
"antibiotic coverage"!

Adapted: Do not delay by awaiting  
"antibiotic coverage"!

Translated: Ne retardez pas la procédure pour attendre  
la "couverture antibiotique"!

Card ID: 33

Card ID: 1

Master: Call for help!

Adapted: Call for help!

Translated: Appelez à l'aide!

Card ID: 2

Card ID: 3

Master: Airway

Adapted: Airway

Translated: Voies aériennes

Card ID: 4

Master: Position so airway is not occluded or at risk of aspiration.

Adapted: Position so airway is not occluded or at risk of aspiration.

Translated: Dégagez les voies aériennes pour éviter l'obstruction et le risque d'aspiration.

Card ID: 5

Card ID: 7

Master: Breathing

Adapted: Breathing

Translated: Respiration

Card ID: 6

Master: If gasping or absent ventilate with bag and mask.

Adapted: If gasping or absent ventilate with bag and mask.

Translated: En cas de suffocation ou d'absence de respiration, ventilez à l'aide d'un ballon ou d'un masque.

Card ID: 8

Card ID: 11

Master: Circulation

Adapted: Circulation

Translated: Circulation

Card ID: 12

Master: Insert 2 wide bore IV cannulas.

Adapted: Insert 2 wide bore IV cannulaes.

Translated: Insérez 2 canules IV à gros calibre.

Card ID: 13

Master: Give at least 2 L fluids IV, Normal Saline or Ringer's lactate in the first hour.

Adapted: Give at least 2L fluids IV, Normal Saline or Ringer's lactate in the first hour.

Translated: Administrez au moins 2L de liquide en IV, sérum physiologique ou Ringer's lactate au cours de la première heure.

Card ID: 14

Master: Insert indwelling urine catheter to monitor in- and output.

Adapted: Insert indwelling urine catheter to monitor in- and output.

Translated: Introduisez une sonde urinaire à demeure pour surveiller la diurèse.

Card ID: 15

Card ID: 16

Master: Drugs

Adapted: Drugs

Translated: Médicaments

Card ID: 17

Master: Antibiotics intravenous according to local guidelines, for example:

Adapted: Antibiotics intravenous according to local guidelines, for example:

Translated: Antibiotiques en intraveineuse en fonction des recommandations locales, par exemple :

Card ID: 18

Master: Ampicillin 2 g/6 hrs

Adapted: Ampicillin 1g/6 hrs (2g the first time)

Translated: Ampicilline 1g/6h (2g la première fois)

Card ID: 19

Master: AND

Adapted: AND

Translated: ET

Card ID: 20

Master: Gentamicin 240 mg/24 hrs

Adapted: Gentamycin 240mg/24 hrs

Translated: Gentamicine 240mg/24h

Card ID: 21

Master: AND

Adapted: AND

Translated: ET

Card ID: 22

Master: Metronidazole 500 mg/8 hrs

Adapted: Metronidazole 500mg/8 hrs

Translated: Métronidazole 500mg/8h.

Card ID: 27

Card ID: 39

Master: If in a malaria risk area,  
treat according to local guidelines.



Adapted: Give appropriate analgesia then evacuate using no-touch technique.

Translated: Administrez les analgésiques recommandés et procédez à l'évacuation en utilisant la technique no-touch (sans contact).

Card ID: 40

Master: Chloramphenicol should be avoided in pregnant and lactating women.

Adapted: Until 12-14 week of gestation Manual Vacuum Aspiration (MVA) is the preferred method.

Translated: Jusqu'à 12-14 semaines gestationnelles, l'Aspiration Manuelle Intra-Utérine (AMIU) est la méthode préférentielle.

## **Description: Maternal Sepsis Following Management**

### **Chapter Key: \_1486841218351**

Card ID: 1

Master: Assess vital signs each hour until stabilised.

Adapted: Assess vital signs each hour until stabilized.

Intravenous fluid treatment should be liberal over the next 12 hours to maintain a satisfactory blood pressure of at least 90mmHg systolic and an average urine output of at least 50 ml per hour.

Translated: Évaluez les signes vitaux toutes les heures jusqu'à stabilisation.

La dose de liquide en intraveineuse administrée doit être abondante au cours des 12 heures suivantes afin de maintenir une pression sanguine satisfaisante d'au moins 90mm Hg systolique et une diurèse moyenne d'au moins 50 ml par heure.

Card ID: 2

Master: 2. Intravenous fluid treatment should be liberal over the next 12 hours to maintain a satisfactory blood pressure of at least 90 mmHg systolic and an average

urine output of at least 50 ml per hour.

Adapted: 2. Intravenous fluid treatment should be liberal over the next 12 hours to maintain a satisfactory blood pressure of at least 90 mmHg systolic and an average urine output of at least 50 ml per hour.

Translated: 2. Intravenous fluid treatment should be liberal over the next 12 hours to maintain a satisfactory blood pressure of at least 90 mmHg systolic and an average urine output of at least 50 ml per hour.

Card ID: 3

Master: 3. Access the fluid balance:

- a) Record all oral and intravenous input.
- b) Record all urinary, faeces and vomiting output.
- c) Add to output 1 liter at no fever and 1½ liter at fever because of perspiration.

Adapted: 3. Access the fluid balance:

- a) Record all oral and intravenous input.
- b) Record all urinary, faeces and vomiting output.
- c) Add to output 1 liter at no fever and 1½ liter at fever because of perspiration.

Translated: 3. Access the fluid balance:

- a) Record all oral and intravenous input.
- b) Record all urinary, faeces and vomiting output.
- c) Add to output 1 liter at no fever and 1½ liter at fever because of perspiration.

## **Description: Maternal Sepsis Identify Cause**

**Chapter Key: \_1486841415440**

Card ID: 1

Master: Go through the six W's:

Adapted: Go through the six W's

Translated: Vérifiez ces six éléments

Card ID: 2

Card ID: 3

Master: Womb

Adapted: Womb

Translated: Ventre

Card ID: 4

Master: At chorioamnionitis delivery should ideally be within 12 hours.

Adapted: At Chorioamnionitis delivery should ideally be within 12 hours.

Translated: En cas de chorioamnionite, accouchement dans l'idéal sous 12 heures.

Card ID: 28

Master: At endometritis (puerperal sepsis) evacuation of the uterus (MVA or D&C) if no improvement after 24 hrs.

Adapted: At Endometritis (Puerperal sepsis) evacuation of the uterus (MVA or D&C) if no improvement after 24 hrs.

Translated: En cas d'endométrite (septicémie puerpérale), évacuez l'utérus (AMIU ou D&C) si aucune amélioration n'a eu lieu après 24 heures.

Card ID: 6

Card ID: 9

Master: Weaning

Adapted: Weaning

Translated: Sevrage

Card ID: 7

Master: Mastitis or abscess.

Adapted: Mastitis or Abscess

Translated: Mammites ou Abscès

Card ID: 24

Master: Add Dicloxacillin.

Adapted: Add Dicloxacillin.

Translated: Ajoutez de la dicloxacilline.

Card ID: 8

Card ID: 10

Master: Wind

Adapted: Wind

Translated: Air

Card ID: 11

Master: Pneumonia

Adapted: Pneumonia

Translated: Pneumonie

Card ID: 25

Master: Treat with Penicillin.

Adapted: Treat with Penicillin.

Translated: Traitez avec de la pénicilline.

Card ID: 17

Card ID: 12

Master: Water

Adapted: Water

Translated: Eau

Card ID: 13

Master: Urinary tract infection

Adapted: Urine tract infection

Translated: Infection urinaire

Card ID: 26

Master: Treat with Ampicillin and Gentamicin.

Adapted: Treat with Ampicillin and Gentamycin.

Translated: Traitez avec de l'ampicilline et de la gentamicine.

Card ID: 14

Card ID: 15

Master: Wound

Adapted: Wound

Translated: Plaie

Card ID: 16

Master: Add Dicloxacillin, consider wound revision.

Adapted: Add Dicloxacillin, consider wound revision.

Translated: Ajoutez de la dicloxacilline, envisagez un examen de la plaie.

Card ID: 29

Card ID: 18

Master: Wings

Adapted: Wings

Translated: Ailes

Card ID: 19

Master: Treat malaria according to local guidelines if positive test.

Adapted: Treat Malaria according to local guidelines if positive test.

Translated: Traitez le paludisme en fonction des recommandations locales si le test est positif.

Card ID: 20

Card ID: 21

Master: Also think of meningitis (neck stiffness), cholecystitis (right upper abdominal pain) and appendicitis (right lower abdominal pain, though could be at level of umbilicus when pregnant). Start treatment and refer to a higher-level facility.

Adapted: Also think of Meningitis (neck stiffness), Cholecystitis (right upper abdominal pain) and Appendicitis (right lower abdominal pain, though could be at level of umbilicus when pregnant): Start treatment and refer to a higher-level facility.

Translated: Pensez aussi à la méningite (rigidité du cou), à la cholécystite (douleur dans le quadrant supérieur droit de l'abdomen) et à l'appendicite (douleur dans le quadrant inférieur droit de l'abdomen, parfois au niveau du nombril lors de la grossesse) :

Commencez le traitement et évacuez vers un établissement de niveau supérieur.

Card ID: 22

Card ID: 23

Master: Treat with IV antibiotics for 48 hours after the woman is fever free, then oral antibiotics for 5-7 days or more depending on the diagnosis.

Adapted: Treat with IV antibiotics for 48 hours, then if improvement; oral antibiotics for 5-7 days or more depending on the diagnosis.

Translated: Traitez avec des antibiotiques en IV pendant 48 heures, puis en cas d'amélioration avec des antibiotiques oraux pendant 5 à 7 jours ou plus selon le diagnostic.

Card ID: 27

Master: Ensure that the HIV status of all women is known, and that appropriate antiretroviral therapy protocols are followed.

Adapted: Ensure that the HIV status of all women is known, and that appropriate antiretroviral therapy protocols are followed.

Translated: Assurez-vous que le statut VIH de toutes femme est connu et que les protocoles de thérapie antirétrovirale sont suivis.

## **Description: Newborn Management Routine Care**

### **Chapter Key: apgar-score\_1491225099370**

Card ID: 2

Master: Assess the newborn with Apgar score 1, 5 and 10 minutes after birth.

Adapted: Assess the newborn with Apgar score 1, 5 and 10 minutes after birth.

Translated: Faites le test d'Apgar à 1, 5 et 10 minutes après la naissance.

Card ID: 3

Master: Apgar 7-10: Healthy

Adapted: Apgar 7-10: Healthy

Translated: Apgar 7-10: en bonne santé



Card ID: 5

Master: Apgar 0-6: Requires medical attention

Adapted: Apgar 0-6: Require medical attention

Translated: Apgar 0-6: requiert une attention médicale

Card ID: 6

0 points1 point2 points

	Activity	
Limb arms and legs	Arms and legs flexed	Active
		Pulse

AbsentLess than 100Above 100

	Grimace	
No response	Grimace	Sneeze, cough

	Appearance (skin colour)	
Blue or pale	Body pink, arms and legs blue	All pink

	Respiration	
Absent	Slow, irregular	Crying

Total score

## Chapter Key: initial-care\_1491225120716

Card ID: 1

Master: All newborns need routine care after delivery.

Adapted: All newborns need routine care after delivery.

Translated: Tous les nouveau-nés ont besoin de soins de routine après la naissance.

Card ID: 2

Master: Avoid separating mother from newborn whenever possible and do not leave mother and newborn unattended at any time.

Adapted: Avoid separating mother from newborn whenever possible and do not leave mother and newborn unattended at any time.

Translated: Évitez de séparer la mère du nouveau-né quand cela est possible et ne laissez jamais la mère et le nouveau-né sans surveillance.

Card ID: 3

Master: At delivery dry and stimulate the newborn. If not crying well or having difficulty breathing proceed to neonatal resuscitation.

Assess Apgar Score at 1, 5 and 10 minutes

Monitor the newborn closely.

Check the cord for bleeding every 15 min, keep it clean and dry. If bleeding, retie it.

Give 1 mg Vitamin K (IM).

Start breastfeeding within the first hour after birth and let the newborn feed on demand.

Examine the newborn, look for danger signs.

Apply antibiotic eye drops.

Give vaccines according to national guidelines.

Weigh the newborn, if less than 2.5 kg consider the newborn low birth weight and at risk of complications such as low blood sugar, respiratory distress and severe infections. Admit and monitor closely for danger signs, consider referral to a facility with advanced care.

The lower gestational age or birth weight, the higher the risk that the newborn is unable to suck adequately. Feed by cup or nasogastric tube. See action card for instructions.

If clinically stable manage with Kangaroo Motherhood Care: continuous and prolonged skin-to-skin contact with the mother or another caregiver. Initiate at the hospital and continue at home.

Adapted: At delivery dry and stimulate the newborn. If not crying well or having difficulty breathing proceed to neonatal resuscitation.

Assess Apgar Score at 1, 5 and 10 minutes

Monitor the newborn closely

Check breathing and colour every five minutes

Check the cord for bleeding every 15 min, keep it clean and dry. If bleeding, retie it.

Give 1 mg Vitamin K (IM)

Start breastfeeding within the first hour after birth and let the newborn feed on demand.

Examine the newborn, look for danger signs

Apply antibiotic eye drops

Give vaccines according to national guidelines.

Weigh the newborn, if less than 2.5 kg consider the newborn low birth weight and at risk of complications such as low blood sugar, respiratory distress and severe infections. Admit and monitor closely for danger signs, consider referral to a facility with advanced care.

The lower gestational age or birth weight, the higher risk that the newborn is unable to

suck adequately. Feed by cup or nasogastric tube. See action card for instructions. If clinically stable manage with Kangaroo Motherhood Care: continuous and prolonged skin-to-skin contact with the mother or another caregiver. Initiate at the hospital and continue at home.

Translated: À la naissance, séchez et stimulez le nouveau-né. Si le nouveau-né ne pleure pas normalement ou a la difficulté à respirer, procédez à la réanimation néonatale.

Faites le teste d'APGAR après 1, 5 et 10 minutes.

Surveiller attentivement le nouveau-né

Vérifiez la respiration et la couleur toutes les cinq minutes

Le cordon ombilical doit rester propre et sec. Vérifiez le cordon ombilical pour le saignement toutes les 15 minutes. En cas de saignement, renouez-le.

Administrez 1 mg de Vitamine K (IM)

Démarrez l'allaitement dans la première heure après la naissance et laissez le nouveau-né se nourrir à volonté.

Examinez le nouveau-né, recherchez les signes de danger.

Administrez les gouttes ophtalmique antibiotiques

Administrez les vaccins en fonction de recommandations nationale.

Pesez le nouveau-né. Si son poids est inférieur à 2,5 kg, traitez-le comme un nouveau-né prématuré de faible poids et à risque de complications tels que l'hypoglycémie, la détresse respiratoire et les infections grave. Hospitalisez-le et surveiller attentivement les signes de danger, considérez un renvoi à une structure des soins avancés.

Plus l'âge gestationnel et les poids de naissance sont faibles, plus le nouveau-né risque de ne pas pouvoir téter correctement. Nourrirez-le à la tasse ou par sonde nasogastrique. Pour plus d'instruction, consultez la carte d'action.

Si l'état clinique est stable, suivez la méthode mère-kangourou à contact prolongé et continu peau à peau avec la mère ou un personnel soignant. A commencer à l'hôpital et continuer à la maison.

Card ID: 4

Master: At discharge ask the mother to return if the newborn shows any danger signs.

Adapted: At discharge ask the mother to return if the newborn shows any danger signs.

Translated: Demandez à la mère de revenir à la structure de santé si le nouveau-né présente des signes de danger.

## Description: Neonatal Resuscitation

### Chapter Key: \_1486842883916

Card ID: 22

Master: The Golden Minute: By one minute of age all newborns should be able to breathe on their own or should be ventilated with a bag and a mask.

Adapted: The Golden Minute: All newborns should by one minute of age breathe on their own or should be ventilated with a bag and a mask.

Translated: La "minute en or" signifie que tous les nouveau-nés devraient dans la minute qui suit la naissance respirer seul. Sinon ils doivent être ventilés par masque et ballon.

Card ID: 23

Master: Assess the newborn within the first 30 seconds of life.

Adapted: Assess the newborn within the first ½ minute of life.

Translated: Tous les nouveau-nés doivent être examinés au cours des 30 secondes qui suivent la naissance.

Card ID: 2

Master: Resuscitate if the newborn is gasping or not crying or breathing.

Adapted: Resuscitate if the newborn is gasping or not crying or breathing.

Translated: Réanimatez si le nouveau-né ne pleure pas ou ne respire pas bien, s'il est flasque, sans tonus et si sa coloration est pâle.

Card ID: 3

Master: Dry and stimulate, if not born in thick meconium.

Adapted: Dry and stimulate, if not born in thick meconium.

Translated: Séchez et stimulez en cas d'absence de mucus épais sur le nouveau-né.

Card ID: 4

Master: If thick meconium: clear mouth and nose and suction airways before stimulating.

Adapted: If solid meconium: clear mouth and nose and suction airways before stimulating.

Translated: En cas de présence de mucus épais : nettoyez la bouche et le nez et pratiquez l'aspiration de l'oropharynx.

Card ID: 5

Master: If not breathing after 30 seconds:

Adapted: If not breathing after ½ minute:

Translated: S'il ne respire pas après 30 secondes:

Card ID: 6

Master: CALL FOR HELP!

Adapted: CALL FOR HELP!

Translated: APPELEZ À L'AIDE!

Card ID: 7

Master: Clamp and cut the umbilical cord and do the following:

Adapted: Clamp and cut the umbilical cord and do the following:

Translated: Clampez et coupez le cordon ombilical, puis :

Card ID: 8

Card ID: 9

Master: Airway

Adapted: Airway

Translated: Voies aériennes

Card ID: 10

Master: Position the head in neutral position.

Adapted: Position the head in the neutral position.

Translated: Placez en position du « renifleur ».

Card ID: 11

Master: Position mask so it covers mouth and nose, use the “C” and “E” grip.

Adapted: Position mask so it covers mouth and nose, use the “C” and “E” grip.

Translated: Le masque doit être placé de telle sorte qu’il couvre la bouche et le nez, en maintenant le masque avec le pouce et l’index (formez un C avec les doigts) et en saisissant les mâchoires avec les trois doigts restants (formez un E).

Card ID: 12

Master: Give 5 slow inflation breaths each lasting 2-3 seconds.

Adapted: Give 5 slow inflation breaths each lasting 2-3 seconds.

Translated: Donnez 5 insufflations lentes de 2 à 3 secondes chacune.

Card ID: 13

Master: Observe that chest is moving.

Adapted: Observe that chest is moving.

Translated: Vérifiez que le thorax se soulève.

Card ID: 24

Master: If not moving, check the positioning of the head and the mask.

Adapted: If not moving, check the positioning of the head and the mask.

Translated: S'il ne se soulève pas, vérifiez la position de la tête et du masque.

Card ID: 25

Master: Consider performing jawthrust.

Adapted: Consider performing jawthrust.

Translated: Relevez éventuellement la mâchoire.

Card ID: 26

Master: Give five inflation breaths again.

Adapted: Give five inflation breaths again.

Translated: Re-donnez 5 insufflations.

Card ID: 14

Master: Oxygen supplement is not necessary.

Adapted: Oxygen supplement is not necessary.

Translated: Un supplément d'oxygène n'est pas nécessaire.

Card ID: 15

Card ID: 16

Master: Breathing

Adapted: Breathing

Translated: Respiration

Card ID: 17

Master: If breathing is still insufficient or heart rate is below 100 beats per minute;

Adapted: If breathing is still insufficient or heart rate is below 100 beats per minute;

Translated: Si la respiration est toujours insuffisante ou si le rythme cardiaque est inférieur à 100 battements par minute :

Card ID: 18

Master: Give ventilation breaths at a rate of 40/minute.

Adapted: Give ventilation breaths at a rate of 40/minute

Translated: Ventilez par insufflation au débit 40/minute



Card ID: 19

Master: Observe chest is moving. If not go back to Airway.

Adapted: Observe chest is moving. If not go back to Airway

Translated: Vérifiez que le thorax se soulève. Si non, revenez à Voies aériennes

Card ID: 20

Master: Assess breathing and heart rate every minute.

Adapted: Assess breathing and heart rate every 30 seconds.

Translated: Évaluez la respiration et le rythme cardiaque toutes les 30 secondes.

Card ID: 21

Master: If breathing is still insufficient or heart rate is below 100 continue ventilation breaths.

Adapted: If breathing is still insufficient or heart rate is below 100 continue ventilation breaths.

Translated: Si la respiration est toujours insuffisante ou si le rythme cardiaque est inférieur à 100 continuez à ventiler par insufflation.

## **Description: Post Abortion Care\_definitions**

### **Chapter Key: \_1486843724228**

Card ID: 14

Master: Septic Abortion

Adapted: Septic Abortion

Translated: Septic Abortion

Card ID: 1

Master: Septic abortion is diagnosed by the following signs:

Adapted: Septic abortion is diagnosed by the following signs:

Translated: L'avortement septique se diagnostique d'après les signes suivants :

Card ID: 2

Master: Tender uterus

Adapted: Tender uterus

Translated: Utérus sensible

Card ID: 3

Master: AND

Adapted: AND

Translated: ET

Card ID: 4

Master: Abnormal, foul smelling vaginal discharge

Adapted: Abnormal, foul smelling vaginal discharge

Translated: Pertes vaginales anormales et fétides

Card ID: 5

Master: OR

Adapted: OR

Translated: OU

Card ID: 9

Master: Rebound tenderness

Adapted: Rebound tenderness

Translated: Douleur à la décompression

Card ID: 7

Master: OR

Adapted: OR

Translated: OU

Card ID: 8

Master: Any signs of shock (systolic blood pressure below 90) or pre-shock (pulse above 90).

Adapted: Any signs of shock (systolic blood pressure below 90) or pre-shock (pulse above 90).

Translated: Signe de choc (tension artérielle systolique inférieure à 90) ou pré-choc (pouls supérieur à 90).

Card ID: 12

Master: REMEMBER! Septic abortion often, but not always, causes fever. A woman with sepsis can have an increased, normal, or low temperature.

Adapted: WARNING: Septic abortion often causes fever but not necessarily

Translated: ATTENTION : L'avortement septique provoque souvent de la fièvre mais pas nécessairement.

## **Description: Post Abortion Care Emergency Management**

### **Chapter Key: \_1486843950040**

Card ID: 1

Master: At signs of septic abortion or at excessive vaginal bleeding

Adapted: At signs of septic abortion or at excessive vaginal bleeding

Translated: En cas de signe d'avortement septique ou d'hémorragie vaginale excessive

Card ID: 2

Master: Evacuation of the uterus must be performed with no delay!

Adapted: Evacuation of the uterus must be performed with no delay!

Translated: L'évacuation de l'utérus doit avoir lieu sans délai!

Card ID: 36

Master: Do not delay by awaiting "antibiotic coverage"!

Adapted: Do not delay by awaiting "antibiotic coverage"!

Translated: Ne retardez pas la procédure pour attendre la "couverture antibiotique"!

Card ID: 4

Card ID: 5

Master: CALL FOR HELP!

Adapted: CALL FOR HELP!

Translated: APPELEZ À L'AIDE!

Card ID: 6

Card ID: 11

Master: Airway

Adapted: Airway

Translated: Voies aériennes

Card ID: 10

Master: Position so airway is not occluded or at risk of aspiration.

Adapted: Position so airway is not occluded or at risk of aspiration.

Translated: Dégagez les voies aériennes pour éviter l'obstruction et le risque d'aspiration.

Card ID: 8

Card ID: 12

Master: Breathing

Adapted: Breathing

Translated: Respiration

Card ID: 13

Master: If gasping or absent ventilate with bag and mask.

Adapted: If gasping or absent ventilate with bag and mask.

Translated: En cas de suffocation ou d'absence de respiration, ventilez à l'aide d'un ballon ou d'un masque.

Card ID: 14

Card ID: 15

Master: Circulation

Adapted: Circulation

Translated: Circulation

Card ID: 16

Master: Insert 2 wide bore IV cannulas.

Adapted: Insert 2 wide bore IV cannulas.

Translated: Insérez 2 canules IV à gros calibre.

Card ID: 17

Master: Give at least 2L fluids IV, normal saline or Ringer's lactate fast.

Adapted: Give at least 2L fluids IV, normal saline or Ringer's lactate fast.

Translated: Administrez au moins 2L de liquide en IV, du sérum physiologique ou du Ringer's lactate rapidement.

Card ID: 18

Master: Insert indwelling urine catheter to monitor in- and output.

Adapted: Insert indwelling urine catheter to monitor in- and output.

Translated: Introduisez une sonde urinaire à demeure pour surveiller la diurèse.

Card ID: 20

Card ID: 21

Master: Drugs

Adapted: Drugs

Translated: Médicaments

Card ID: 22

Master: Give antibiotics intravenous according to local guidelines, for example:

Adapted: Antibiotics intravenous according to local guidelines, for example:

Translated: Antibiotiques en intraveineuse en fonction des recommandations locales, par exemple :

Card ID: 23

Master: Ampicillin 1 g/6 hrs. (2 g the first time)

Adapted: Ampicillin 1g/6 hrs. (2 g the first time)

Translated: Ampicilline 1g/6h (2g la première fois)

Card ID: 24

Master: AND

Adapted: AND

Translated: ET

Card ID: 25

Master: Gentamicin 240 mg/24 hrs.

Adapted: Gentamycin 240mg/24hrs.

Translated: Gentamicine 240mg/24h.

Card ID: 26

Master: AND

Adapted: AND

Translated: ET

Card ID: 27

Master: Metronidazole 500 mg/8 hrs.



Adapted: Metronidazole 500mg/8 hrs.

Translated: Métronidazole 500mg/8h.

Card ID: 28

Master: This must not delay the lifesaving EVACUATION of the uterus.

Adapted: This must not delay the lifesaving EVACUATION of the uterus.

Translated: Cela ne doit pas retarder l'ÉVACUATION de l'utérus, dont dépend la vie de la patiente.

Card ID: 29

Master: Give antibiotics while you start the procedure.

Adapted: Give antibiotics while you start the procedure.

Translated: Administrez les antibiotiques tout en démarrant la procédure.

Card ID: 30

Master: If antibiotics are not available, perform evacuation and give antibiotics afterwards.

Adapted: If antibiotics are not available, perform evacuation and give antibiotics afterwards.

Translated: Si vous ne disposez pas d'antibiotiques, procédez à l'évacuation et administrez les antibiotiques plus tard.

Card ID: 31

Card ID: 32

Master: Evacuate Uterus

Adapted: Evacuate Uterus

Translated: Évacuez l'utérus

Card ID: 33

Master: Give appropriate analgesia then evacuate using no-touch technique.

Adapted: Give appropriate analgesia then evacuate using no-touch technique.

Translated: Administrez les analgésiques recommandés et procédez à l'évacuation en utilisant la technique no-touch (sans contact).

Card ID: 34

Master: Until 12-14 weeks of gestation Manual Vacuum Aspiration (MVA) is the preferred method.

Adapted: Until 12-14 week of gestation Manual Vacuum Aspiration (MVA) is the preferred method.

Translated: Jusqu'à 12-14 semaines gestationnelles, l'Aspiration Manuelle Intra-Utérine (AMIU) est la méthode préférentielle.

Card ID: 35

Master: At a higher gestational age evacuation is by Dilatation and Curettage (D&C) and should be performed in a referral facility.

Adapted: At a higher gestational age evacuation is by Dilatation and Curettage (D&C) and should be performed in a referral facility.

Translated: À un âge gestationnel plus avancé, l'évacuation doit se faire par Dilatation et Curetage (D&C) dans un centre de niveau supérieur.

## **Description: Post Abortion Care Following Management**

### **Chapter Key: \_1486845344690**

Card ID: 2

Master: Monitor vital signs and urine output closely until stable.

Treat with IV antibiotics until 48 hours after the woman is fever free, then oral antibiotics for 5-7 days.

Before discharge, advise on family planning and check for sexually transmitted diseases and HIV/AIDS.

Adapted: Monitor vital signs and urine output closely until stable.

Treat with IV antibiotics until 48 hours after the woman is fever free, then oral antibiotics for 5-7 days.

Before discharge, advice on family planning and check for sexually transmitted diseases and HIV/AIDS.

Translated: Contrôlez de près les signes vitaux et la diurèse jusqu'à stabilisation.

Traitez avec des antibiotiques IV pendant 48 heures, puis avec des antibiotiques oraux pendant 5 à 7 jours.

Avant le départ de la patiente, renseignez-la sur le planning familial et faites un dépistage des maladies sexuellement transmissibles et du VIH/SIDA.

## **Description: Post Partum Hemorrhage Arms**

### **Chapter Key: \_1486846827255**

Card ID: 8

Master: Check pulse and blood pressure

Adapted: Check pulse and blood pressure

Translated: Vérifiez le pouls et la TA

Card ID: 3

Master: Large bore IV Access x2

Adapted: Large bore IV Access x2

Translated: Posez une voie veineuse à l'aide de deux canules à GROS CALIBRE x2

Card ID: 4

Master: X-match Blood

Adapted: X-match Blood

Translated: Contrôlez la compatibilité sanguine.

Card ID: 5

Master: Start fluid resuscitation 3 L normal saline or Ringer's lactate fast!

Adapted: Start fluid resuscitation 3L normal saline or Ringer's Lactate fast!

Translated: Démarrez la réanimation liquidienne, 3L de sérum physiologique ou liquide de Ringer RAPIDEMENT

Card ID: 11

Master: Give drugs:

Adapted: Give drugs:

Translated: Administrez les médicaments :

Card ID: 12

Master: Ergometrine 0.2 mg. IV (contraindicated at hypertension and retained placenta). Oxytocin drip. Blend 20 IU of Oxytocin in 1 L normal saline or Ringer's lactate and administer at fastest flow rate possible.

Misoprostol 800 mcg sublingually if the bleeding continues and Oxytocin is not available.

Adapted: Ergometrine 0,2 mg. IV (contraindicated at hypertension and retained placenta)

Oxytocin drip. Blend 20 IU of Oxytocin in 1 L normal saline or Ringer's Lactate and administer at fastest flow rate possible.

Misoprostol 800 mcg sublingually if the bleeding continues and Oxytocin is not available

Translated: Ergométrine 0,2 mg. IV (contre-indiqué en cas de l'hypertension et la rétention placentaire)

Solution de l'Ocytocine. Mélangez 20 UI d'ocytocine dans 1L de sérum physiologique ou de liquide de Ringer et administrez la solution le plus rapidement possible.

Misoprostole 800 microg par voie orale si l'hémorragie persiste et l'Ocytocine n'est pas disponible

## **Description: Post Partum Hemorrhage Head**

### **Chapter Key: \_1486847046019**

Card ID: 6

Master: Check airway and breathing

Adapted: Check Airway and Breathing

Translated: Vérifiez les voies aériennes et la respiration

Card ID: 7

Master: Ventilate if breathing is insufficient

Adapted: Ventilate if breathing is insufficient

Translated: Ventilez en cas d'absence de respiration

Card ID: 8

Master: Lie flat

Adapted: Lie flat

Translated: Réposez bien à plat

Card ID: 9

Master: Note time of relevant events

Adapted: Note time of relevant events

Translated: Notez l'heure des évènements pertinents

Card ID: 10

Master: Reassure woman

Adapted: Reassure woman

Translated: Rassurez la femme

## **Description: Post Partum Hemorrhage Uterus**

### **Chapter Key: \_1486847313094**

Card ID: 1

Master: Start Here – Call For Help!

Adapted: Start Here – Call For Help!

Translated: Démarrez ici – Appelez à l'aide !

Card ID: 2

Master: While you wait for helpers do the following:

Adapted: While you wait for helpers do the following:

Translated: Attendez les aidants, en faisant:

Card ID: 3

Master: Continuous uterus massage

Catheterise bladder

If strong bleeding persists – apply bimanual compression or aorta compression

Adapted: Continuous uterus massage

Catheterize bladder

If strong bleeding persists – apply bimanual compression or aorta compression

Translated: Pratiquez un massage utérin continu

Sondez la vessie

Si l'atonie persiste - faites une compression bimanuelle ou une compression de l'aorte

Card ID: 4

Master: When helpers arrive:

Adapted: When helpers arrive:

Translated: Quand les aidants arrivent:

Card ID: 5

Master: Co-ordinate:

Adapted: Co-ordinate:

Translated: Coordinez:

Card ID: 6

Master: Helper 1 at 'head'  
Helpers 2 and 3 at 'arms'

Adapted: Helper 1 at 'Head'  
Helpers 2 and 3 at 'Arms'

Translated: Aidant 1 à la tête  
Aidant 2 et 3 aux bras

Card ID: 7

Master: Review other causes - 4 T's

Adapted: Review other causes - 4 T's

Translated: Passez en revue les autres causes - Les 4 T's

Card ID: 9

Master: Tone  
Trauma  
Tissue  
Thrombin

Adapted: Tone  
Trauma  
Tissue  
Thrombin

Translated: Tonus  
Traumatisme  
Tissu  
Thrombine

**Description: Vacuum Delivery Indications**



## Chapter Key: \_1486847779329

Card ID: 1

Master: Pushing for more than one hour with good contractions.  
Foetal heart rate remaining below 100 or above 180 beats per minute.  
Maternal exhaustion.  
Maternal heart disease or hypertension (though these patients should be giving birth in a referral facility).

Adapted: Pushing for more than one hour with good contractions.  
Foetal heart rate remaining below 100 or above 180 beats per minute.  
Maternal exhaustion.  
Maternal heart disease or hypertension (though these patients should be giving birth in a referral facility).

Translated: 1. Poussée pendant plus d'une heure avec de bonnes contractions.  
2. Rythme cardiaque fœtal restant inférieur à 100 ou supérieur à 180 battements par minute.  
3. Épuisement maternel.  
4. Maladie cardiaque maternelle ou hypertension (ces patientes devraient accoucher dans un centre de niveau supérieur).

## Description: Vacuum Delivery Prerequisites

## Chapter Key: \_1486847915881

Card ID: 1

Master: Cephalic presentation not more than 1/5 palpable above pubic bone.  
Position occiput posterior or occiput anterior.  
Fully dilated.  
Ruptured membranes.  
Relevant expertise.  
Willingness to stop.

Adapted: Cephalic presentation not more than 1/5 palpable above pubic bone.  
Position occiput posterior or occiput anterior.  
Fully dilated.  
Ruptured membranes.  
Relevant expertise.

Willingness to stop.

Translated: 1. Présentation céphalique palpable à maximum 1/5 au-dessus de l'os pubien.

2. Position occipito-postérieure ou occipito-antérieure.

3. Complètement dilaté.

4. Membranes rompues.

5. Expertise appropriée.

6. Volonté d'arrêter.

## **Description: Vacuum Delivery Procedure as by Also**

### **Chapter Key: \_1486848044218**

Card ID: 29

Master: Go through A-J

Adapted: Go through A-J

Translated: Lisez de A à M

Card ID: 2

Card ID: 3

Master: Ask for help.

Adapted: Ask for help.

Translated: APPELER à l'aide.

Card ID: 4

Master: Address the patient, tell her what you are about to do while you continue to prepare, tell her that you need her to cooperate and keep pushing when there is a contraction.

Adapted: Address the patient, tell her what you are about to do while you continue to prepare, tell her that you need her to cooperate and keep pushing when there is a contraction.

Translated: ADRESSEZ-VOUS à la patiente, dites-lui ce qui va se passer tout en continuant les préparations, que vous avez besoin de sa coopération et qu'elle continue à pousser pendant les contractions.

Card ID: 5

Master: Abdominal palpation – the head should not be palpable more than 1/5 above the pubic bone.

Adapted: Abdominal palpation – the head should not be palpable more than 1/5 above the pubic bone.

Translated: Palpation ABDOMINALE – la tête palpable à maximum 1/5 au-dessus de l'os pubien.

Card ID: 6

Card ID: 7

Master: Bladder empty.

Adapted: Bladder empty.

Translated: Videz la VESSIE.

Card ID: 8

Card ID: 9

Master: Check that Cervix is fully dilated.

Adapted: Check that Cervix is fully dilated.

Translated: CONSTATEZ que le COL DE L'UTÉRUS est complètement dilaté.

Card ID: 10

Master: Contractions – there must be contractions to succeed.

Adapted: Contractions – there must be contractions to succeed.

Translated: CONTRACTIONS – elles sont nécessaires à la réussite de l'accouchement.

Card ID: 11

Card ID: 12

Master: Determine position – locate the posterior fontanel (triangular shaped) with your index finger. This is important to place the cup correctly.

Adapted: Determine position – locate the posterior fontanel (triangular shaped) with your index finger. This is important to place the cup correctly.

Translated: DÉTERMINEZ la position – localisez la fontanelle postérieure (de forme triangulaire) avec votre index. Il s'agit d'une étape importante avant de placer la cupule correctement.

Card ID: 13

Card ID: 14

Master: Equipment ready – delivery tray, Oxytocin 10 IU for IM injection to the mother, towels, neonatal resuscitator, and vacuum extractor.

Adapted: Equipment ready – delivery tray, Oxytocin 10 IU for IM injection to the mother, towels, neonatal resuscitator, and vacuum extractor.

Translated: ÉQUIPMENT prêt – matériel d'accouchement, l'Ocytocine 10 IU pour injection IM, linges, réanimateur néonatal, et les ventouses obstétricales.

Card ID: 15

Card ID: 16

Master: Flexion Point – most cups are 3 cm from the center to the edge. Place the edge of the cup at the tip of the posterior triangular fontanel.

Adapted: Flexion Point – most cups are 3 cm from the center to the edge. Place the edge of the cup at the tip of the posterior triangular fontanel.

Translated: POINT DE FLEXION – la plupart des cupules mesurent 3 cm du centre à l'extrémité. Placez l'extrémité de la cupule au bord de la fontanelle postérieure triangulaire.

Card ID: 17

Master: Feel for vaginal tissue between the cup and the foetal skull before and after applying suction to avoid trauma to the vagina.

Adapted: Feel for vaginal tissue between the cup and the foetal skull before and after applying suction to avoid trauma to the vagina.

Translated: VÉRIFIEZ que vous sentez le tissu vaginal entre la cupule et le crâne foetal avant et après avoir procédé à l'aspiration pour éviter les traumatismes au vagin.

Card ID: 18

Card ID: 19

Master: Gentle, steady traction with no rocking during a contraction; with the first contractions downward. During the following contractions, more upward.

Adapted: Gentle, steady traction with no rocking during a contraction; with the first contractions downward. During the following contractions, more upward.

Translated: Tirez GRADUELLEMENT et fermement en ligne droite pendant une contraction, vers le bas pendant les premières contractions. Pendant les contractions suivantes, tirez plus vers le haut.

Card ID: 20

Card ID: 21

Master: Halt in between contractions.

Adapted: Halt in between contractions.

Translated: HALTE entre les contractions.

Card ID: 22

Master: HALT and abandon if three pop-offs, or if three pulls with no progress, or if 20 minutes from application delivery is not achieved.

Adapted: HALT and abandon if three pop-offs, or if three pulls with no progress, or if 20 minutes from application delivery is not achieved.

Translated: HALTE et arrêt après trois décollements ou après trois tractions sans progrès, ou si la délivrance n'a pas eu lieu 20 minutes après application.

Card ID: 23

Card ID: 24

Master: Intact perineum!

Adapted: Intact perineum!

Translated: Périnée INTACT !

Card ID: 25

Master: When the head is delivered during the next contraction protect perineum with one hand; squeeze the index and thumb together at the posterior part of the head to prevent stretching of the perineum and lift the head with your third finger upwards and away from the perineum, while the other hand keeps the head from coming too fast.

Adapted: When the head is delivered during the next contraction protect perineum with one hand; squeeze the index and thumb together at the posterior part of the head to prevent stretching of the perineum and lift the head with your third finger upwards and away from the perineum, while the other hand keeps the head from coming too fast.

Translated: Après sortie de la tête au cours de la contraction suivante, protégez le périnée d'une main ; pincez la partie supérieure de la tête entre l'index et le pouce pour éviter l'étirement du périnée, et avec votre majeur, relevez la tête et éloignez-la du périnée pendant que l'autre main empêche la tête de descendre trop vite.

Card ID: 26

Master: An incision is only rarely needed.

Adapted: An incision is only rarely needed.

Translated: Une incision est rarement nécessaire.

Card ID: 27

Card ID: 28

Master: Jaw reachable – release the vacuum and remove the cup.

Adapted: Jaw reachable – release the vacuum and remove the cup.

Translated: Lorsque la MÂCHOIRE est accessible – relâchez le vide et retirez la ventouse.

## **Description: Emergency Referral**

### **Chapter Key: \_1490716076132**

Card ID: 1

Master: Do not refer if emergency is not controlled!

Adapted: Do not refer if emergency is not controlled!

Translated: Ne renvoyez pas si l'urgence n'est pas prise en charge !

Card ID: 2

Master: Never refer a patient with uncontrolled bleeding, retained placenta, uncontrolled hypertension, unevacuated septic or haemorrhagic abortion or septic shock.

Adapted: Never refer a patient with uncontrolled bleeding, retained placenta, uncontrolled hypertension, unevacuated septic or haemorrhagic abortion or septic shock.

Translated: Ne renvoyez jamais un patient avec un saignement incontrôlé, un placenta retenu, une hypertension incontrôlée, un avortement septique/ hémorragique ou un choc septique.

Card ID: 28

Master: If the newborn is in need of referral; give the recommended AB prior to referral.

Adapted: If the newborn is in need of referral; give the recommended AB prior to



referral.

Translated: Si un renvoi du nouveau-né est nécessaire; donnez les antibiotiques recommandés avant le renvoi.

Card ID: 3

Master: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Adapted: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Translated: Après la gestion d'urgence et lors que la femme est stabilisée, discutez la décision de référence avec la femme et ses proches.

Card ID: 4

Master: Quickly organise transport and possible financial aid.

Adapted: Quickly organise transport and possible financial aid.

Translated: Organisez rapidement le transport et l'aide financière éventuelle.

Card ID: 5

Master: Inform the referral center.

Adapted: Inform the referral center.

Translated: Informez le centre de référence.

Card ID: 6

Master: Accompany the woman.

Adapted: Accompany the woman.

Translated: Accompagnez la femme.

Card ID: 7

Master: It is crucial that she is accompanied by a health worker who is trained in delivery care and able to manage an emergency situation, if it occurs during transport.

Adapted: It is crucial that she is accompanied by a health worker who is trained in delivery care and able to manage an emergency situation, if it occurs during transport.

Translated: L'accompagnement d'un agent de santé qualifiée en soins liés à l'accouchement qui soit capable de prendre en charge une urgence est primordial, s'il se produit pendant le transport.

Card ID: 26

Master: Consider to bring a relative who can donate blood.

Adapted: Consider to bring a relative who can donate blood.

Translated: Considérez d'emmener un parent qui peut faire un don de sang.

Card ID: 9

Master: Bring

Adapted: Bring

Translated: Apportez

Card ID: 10

Master: Referral note.

Adapted: Referral note.

Translated: Note de référence.

Card ID: 11

Master: Essential emergency drugs:

Adapted: Essential emergency drugs:

Translated: Médicaments essentiels d'urgence :

Card ID: 12

Master: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of postpartum haemorrhage

Oxytocin for IM injection immediately postpartum

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Adapted: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of postpartum haemorrhage

Oxytocin for IM injection immediately postpartum

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Translated: Ocytocine et Ergométrine (ou Misoprostol) pour le traitement de l'hémorragie du post partum

Ocytocine pour injection IM immédiatement post partum

Hydralazine pour le traitement IV de la tension artérielle élevée

Sulphate de magnésium pour l'éclampsie

Gluconate de calcium pour l'intoxication de Sulphate de magnésium  
Ampicilline pour les infections  
Diazepam pour le soulagement de douleurs  
Phénobarbital pour le nouveau-né en cas de convulsions  
Adrénaline pour le nouveau-né en cas d'arrêt cardiaque

Card ID: 13

Master: Supplies:

Adapted: Supplies:

Translated: Provisions :

Card ID: 14

Master: Delivery set

Towels

IV-equipment + IV fluids (woman + newborn)

Foetoscope or Doppler

Blood pressure monitor

Ambu bag

Suction bulb

Adapted: Delivery set

Towels

IV-equipment + IV fluids (woman + newborn)

Foetoscope or Doppler

Blood pressure monitor

Ambu bag

Suction bulb

Translated: Kit d'accouchement

Serviettes

Equipement et liquides IV

Foetoscope ou Doppler

Moniteur de tension artérielle

Masque et ballon (réanimation néonatale)

Extracteur de mucus

Card ID: 16

Master: During Transport

Adapted: During Transport

Translated: Pendant le transport

Card ID: 17

Master: Observe vital signs and level of consciousness.

Adapted: Observe vital signs and level of consciousness.

Translated: Contrôlez les signes vitaux et niveau de conscience.

Card ID: 18

Master: If pregnant check FHR.

Adapted: If pregnant check FHR.

Translated: Si la femme est enceinte, vérifiez son BPM pour évaluer si le rythme cardiaque soit normale.

Card ID: 19

Master: In case of excessive vaginal bleeding apply bimanual compression.

Adapted: In case of excessive vaginal bleeding apply bimanual compression.

Translated: En cas de saignement vaginal abondant, appliquez une compression bimanuelle.

Card ID: 27

Master: If the bleeding does not stop apply aorta compression (can be maintained up to 6 hours).

Adapted: If the bleeding does not stop apply aorta compression (can be maintained up to 6 hours).

Translated: Si le saignement ne s'arrête pas, appliquez une compression de l'aorte (peut se faire jusqu'à 6 heures de temps).

Card ID: 21

Master: If the woman's condition permits:

Adapted: If the woman's condition permits:

Translated: Si l'état de la femme le permet,

Card ID: 22

Master: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Adapted: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Translated: tenez un registre de tous les liquides IV, médicaments donnés, heure d'administration et l'état de la femme.

Card ID: 23

Master: If in labour during transport:

Adapted: If in labour during transport:

Translated: En travail pendant le transport :

Card ID: 24

Master: Foetal heart rate (FHR) every half an hour.

Adapted: Foetal heart rate (FHR) every half an hour.

Translated: Vérifiez le BPM toutes les 30 minutes.

Card ID: 25

Master: If pushing and superficial breathing is not enough to repress this urge, stop the transport and perform delivery.

Adapted: If pushing and superficial breathing is not enough to repress this urge, stop the transport and perform delivery.

Translated: Si la poussée et la respiration superficielle ne suffisent pas, arrêtez le véhicule et faites accoucher la femme.

## **Description: Emergency Referral - Hypertension**

### **Chapter Key: hypertension\_1527696072521**

Card ID: 2

Master: Do not refer if emergency is not controlled!

Adapted: Do not refer if emergency is not controlled!

Translated: Do not refer if emergency is not controlled!

Card ID: 3

Master: Never refer a patient while convulsing and with uncontrolled hypertension.

Adapted: Never refer a patient while convulsing and with uncontrolled hypertension.

Translated: Never refer a patient while convulsing and with uncontrolled hypertension.

Card ID: 4

Master: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Adapted: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Translated: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Card ID: 5

Master: Quickly organize transport and possible financial aid.

Adapted: Quickly organize transport and possible financial aid.

Translated: Quickly organize transport and possible financial aid.

Card ID: 6

Master: Inform the referral center.

Adapted: Inform the referral center.

Translated: Inform the referral center.

Card ID: 7

Master: Accompany the woman.

Adapted: Accompany the woman.



Translated: Accompany the woman.

Card ID: 8

Master: It is crucial that she is accompanied by a health worker who is trained in delivery care and able to manage an emergency situation, if it resurjects during transport.

Adapted: It is crucial that she is accompanied by a health worker who is trained in delivery care and able to manage an emergency situation, if it resurjects during transport.

Translated: It is crucial that she is accompanied by a health worker who is trained in delivery care and able to manage an emergency situation, if it resurjects during transport.

Card ID: 9

Master: Consider to bring a relative who can donate blood.

Adapted: Consider to bring a relative who can donate blood.

Translated: Consider to bring a relative who can donate blood.

Card ID: 10

Card ID: 11

Master: Bring

Adapted: Bring

Translated: Bring

Card ID: 12

Master: Referral note.

Adapted: Referral note.

Translated: Referral note.

Card ID: 13

Master: Essential emergency drugs:

Adapted: Essential emergency drugs:

Translated: Essential emergency drugs:

Card ID: 14

Master: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of post partum haemorrhage

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin, Gentamicin and Metronidazole for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Adapted: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of post partum haemorrhage

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin, Gentamicin and Metronidazole for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Translated: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of post partum haemorrhage

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia  
Calcium Gluconate for intoxication with Magnesium Sulphate  
Ampicillin, Gentamicin and Metronidazole for infections  
Diazepam for pain relief  
Phenobarbital for the newborn in case of convulsions  
Adrenaline for the newborn in case of cardiac arrest

Card ID: 15

Master: Supplies:

Adapted: Supplies:

Translated: Supplies:

Card ID: 16

Master: Delivery set  
Towels  
IV-equipment + IV fluids  
Foetoscope or Doppler  
Blood pressure monitor  
Adult and Newborn ambu bag with appropriate mask size  
Suction bulb  
Syringes of different size

Adapted: Delivery set  
Towels  
IV-equipment + IV fluids  
Foetoscope or Doppler  
Blood pressure monitor  
Adult and Newborn ambu bag with appropriate mask size  
Suction bulb  
Syringes of different size

Translated: Delivery set  
Towels  
IV-equipment + IV fluids  
Foetoscope or Doppler  
Blood pressure monitor

Adult and Newborn ambu bag with appropriate mask size  
Suction bulb  
Syringes of different size

Card ID: 22

Card ID: 17

Master: During Transport

Adapted: During Transport

Translated: During Transport

Card ID: 18

Master: Observe vital signs and level of consciousness.

Adapted: Observe vital signs and level of consciousness.

Translated: Observe vital signs and level of consciousness.

Card ID: 19

Master: If pregnant check FHR.

Adapted: If pregnant check FHR.

Translated: If pregnant check FHR.

Card ID: 20

Master: If the woman's condition permits:

Adapted: If the woman's condition permits:

Translated: If the woman's condition permits:

Card ID: 21

Master: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Adapted: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Translated: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Card ID: 23

Card ID: 24

Master: If in labour during transport:

Adapted: If in labour during transport:

Translated: If in labour during transport:

Card ID: 25

Master: FHR every half an hour.

Adapted: FHR every half an hour.

Translated: FHR every half an hour.

Card ID: 26

Master: If pushing and superficial breathing is not enough to repress this urge, stop the transport and deliver the woman.

Adapted: If pushing and superficial breathing is not enough to repress this urge, stop the transport and deliver the woman.

Translated: If pushing and superficial breathing is not enough to repress this urge, stop the transport and deliver the woman.

## **Description: Emergency Referral - Post Abortion Care**

### **Chapter Key: post-abortion-care\_1527682813116**

Card ID: 1

Master: Do not refer before you have tried to control an emergency!

Adapted: Do not refer before you have tried to control an emergency!

Translated: Do not refer before you have tried to control an emergency!

Card ID: 2

Master: Never refer a patient with uncontrolled bleeding, un-evacuated septic or haemorrhagic abortion or septic shock.

Adapted: Never refer a patient with uncontrolled bleeding, un-evacuated septic or haemorrhagic abortion or septic shock.

Translated: Never refer a patient with uncontrolled bleeding, un-evacuated septic or haemorrhagic abortion or septic shock.

Card ID: 3

Master: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Adapted: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Translated: After emergency management and when in a stable condition, discuss decision of referral with woman and relatives.

Card ID: 4

Master: Quickly organize transport and possible financial aid.

Adapted: Quickly organize transport and possible financial aid.

Translated: Quickly organize transport and possible financial aid.

Card ID: 5

Master: Inform the referral center.

Adapted: Inform the referral center.

Translated: Inform the referral center.

Card ID: 7

Master: Accompany the woman.

Adapted: Accompany the woman.

Translated: Accompany the woman.

Card ID: 8

Master: It is crucial that she is accompanied by a health worker who is trained in emergency management, if it resurjects during transport.

Adapted: It is crucial that she is accompanied by a health worker who is trained in

emergency management, if it resurjects during transport.

Translated: It is crucial that she is accompanied by a health worker who is trained in emergency management, if it resurjects during transport.

Card ID: 9

Master: Consider to bring a relative who can donate blood.

Adapted: Consider to bring a relative who can donate blood.

Translated: Consider to bring a relative who can donate blood.

Card ID: 10

Card ID: 11

Master: Bring

Adapted: Bring

Translated: Bring

Card ID: 12

Master: Referral note.

Adapted: Referral note.

Translated: Referral note.

Card ID: 14

Master: Essential emergency drugs:



Adapted: Essential emergency drugs:

Translated: Essential emergency drugs:

Card ID: 15

Master: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of post partum haemorrhage

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin, Gentamicin and Metronidazole for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Adapted: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of post partum haemorrhage

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin, Gentamicin and Metronidazole for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Translated: Oxytocin and Ergometrine (alternatively Misoprostol) for treatment of post partum haemorrhage

Hydralazine for IV treatment of elevated blood pressure

Magnesium Sulphate for eclampsia

Calcium Gluconate for intoxication with Magnesium Sulphate

Ampicillin, Gentamicin and Metronidazole for infections

Diazepam for pain relief

Phenobarbital for the newborn in case of convulsions

Adrenaline for the newborn in case of cardiac arrest

Card ID: 16

Master: Supplies:

Adapted: Supplies:

Translated: Supplies:

Card ID: 19

Master: IV-equipment + IV fluids  
Blood pressure monitor  
Adult ambu bag with appropriate mask size  
Syringes of different size

Adapted: IV-equipment + IV fluids  
Blood pressure monitor  
Adult ambu bag with appropriate mask size  
Syringes of different size

Translated: IV-equipment + IV fluids  
Blood pressure monitor  
Adult ambu bag with appropriate mask size  
Syringes of different size

Card ID: 20

Card ID: 21

Master: During Transport

Adapted: During Transport

Translated: During Transport

Card ID: 22

Master: Observe vital signs and level of consciousness.

Adapted: Observe vital signs and level of consciousness.

Translated: Observe vital signs and level of consciousness.

Card ID: 23

Master: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Adapted: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

Translated: Keep record of all IV fluids, medications given, time of administration and the woman's condition.

## **Description: Definition and complications**

### **Chapter Key: \_1527680324210**

Card ID: 19

Master: Definitions

Adapted: Definitions

Translated: Definitions

Card ID: 21

Master: There are four types of Female Genital Mutilations:

Adapted: There are four types of Female Genital Mutilations:

Translated: There are four types of Female Genital Mutilations:

Card ID: 22

Master: Type 1 - Partial or total removal of the clitoris.

Adapted: Type 1 - Partial or total removal of the clitoris.

Translated: Type 1 - Partial or total removal of the clitoris.

Card ID: 23

Master: Type 2 - Partial or total removal of the clitoris and the labia minora and or majora.

Adapted: Type 2 - Partial or total removal of the clitoris and the labia minora and or majora.

Translated: Type 2 - Partial or total removal of the clitoris and the labia minora and or majora.

Card ID: 24

Master: Type 3 - Closing up of the vaginal entry and a small hole is left open for urine menstrual blood to pass.

Adapted: Type 3 - Closing up of the vaginal entry and a small hole is left open for urine menstrual blood to pass.

Translated: Type 3 - Closing up of the vaginal entry and a small hole is left open for urine menstrual blood to pass.

Card ID: 25

Master: A type 2 can result in a type 3 if the raw edges from type 2 are stitched, pressed or healed together naturally.

Adapted: A type 2 can result in a type 3 if the raw edges from type 2 are stitched, pressed or healed together naturally.

Translated: A type 2 can result in a type 3 if the raw edges from type 2 are stitched, pressed or healed together naturally.

Card ID: 26

Master: Type 4- Any procedures that damage the external female genitalia.

Adapted: Type 4- Any procedures that damage the external female genitalia.

Translated: Type 4- Any procedures that damage the external female genitalia.

Card ID: 2

Master: All types of FGM are harmful and results in immediate and long term health risks.

Adapted: All types of FGM are harmful and results in immediate and long term health risks.

Translated: All types of FGM are harmful and results in immediate and long term health risks.

Card ID: 27

Master: The division between the different types are not always clear. There can easily be a mix of genital findings

Adapted: The division between the different types are not always clear. There can easily be a mix of genital findings

Translated: The division between the different types are not always clear. There can easily be a mix of genital findings

Card ID: 4

Card ID: 18

Master: Immediate health risks of FGM

Adapted: Immediate health risks of FGM

Translated: Immediate health risks of FGM

Card ID: 6

Master: Severe pain and shock, infection, excessive bleeding and death.

Adapted: Severe pain and shock, infection, excessive bleeding and death.

Translated: Severe pain and shock, infection, excessive bleeding and death.

Card ID: 8

Card ID: 17

Master: Long term risks of FGM

Adapted: Long term risks of FGM

Translated: Long term risks of FGM

Card ID: 10

Master: Difficulty of passing urine and menstrual blood, infertility, painful intercourse, HIV, hepatitis and psychological consequences and birth complications.

Adapted: Difficulty of passing urine and menstrual blood, infertility, painful intercourse, HIV, hepatitis and psychological consequences and birth complications.

Translated: Difficulty of passing urine and menstrual blood, infertility, painful intercourse, HIV, hepatitis and psychological consequences and birth complications.

Card ID: 11

Card ID: 16

Master: Birth complication due to FGM

Adapted: Birth complication due to FGM

Translated: Birth complication due to FGM

Card ID: 13

Master: Prolonged 2nd stage of labour, perineal tears, newborn asphyxia and postpartum haemorrhage.

Adapted: Prolonged 2nd stage of labour, perineal tears, newborn asphyxia and postpartum haemorrhage.

Translated: Prolonged 2nd stage of labour, perineal tears, newborn asphyxia and postpartum haemorrhage.