

CHILDBIRTH

ALL DELIVERIES, AS TIME PERMITS

OXYGEN: High Flow, as tolerated

MONITOR (ALS Only): Treat rhythm as appropriate

IV ACCESS (ALS Only): TKO

ROUTINE DELIVERY

TRANSPORT: With mother placed on left side, if time permits

DELIVER NEWBORN: If no time for transport, proceed with delivery. As head is delivered, gently suction newborn's mouth and nose while keeping the head dependent. Use hand to prevent explosive delivery. If cord is wrapped around newborn's neck and cannot be slipped over the head, double clamp and cut the cord between clamps. Complete delivery of body, then clamp and cut cord 6 - 8 inches from newborn. Dry the newborn and keep warm. Place newborn on mother's abdomen or breast.

ASSESS NEWBORN: Refer to page 6 of Pediatric Protocols - Neonatal Resuscitation

MASSAGE FUNDUS: Following delivery of placenta

BREECH PRESENTATION

DELIVER NEWBORN: For a buttocks presentation, allow newborn to deliver to the waist without active assistance (support only). Use hand to prevent explosive delivery. When legs and buttocks are delivered, the head can be assisted out. If the head does not deliver within 3- 4 minutes, insert a gloved hand into the vagina, palm towards the baby's face and cord between fingers and create a passage.

TRANSPORT: Stat, while retaining airway for newborn, if head undelivered

PROLAPSED CORD

CONSULT BASE PHYSICIAN:

POSITION: Place in shock position with hips elevated on pillows or knee-chest position

PROTECT CORD: Place gloved hand in vagina and gently push the presenting part off the cord. Cover the exposed portion of cord with saline-soaked gauze. Do not attempt to push cord back.

TRANSPORT: Stat, while retaining both procedures above.

Considerations (ALS Only):

MAGNESIUM SULFATE: 4 gms in 250cc and run at rate determined by transferring physician (approximately 2gms per hour)

Call base for drip changes if increasing hyporeflexia or areflexia occurs

For respiratory arrest, assist ventilations, discontinue magnesium drip and administer 10 - 20 ccs of 10% solution of Calcium Chloride IV push