

The Second Stage of Labour



Well done! You are now 10cms dilated the “pathway” is ready for your baby to make the final part of its journey down through the birth canal and into the world. In this “doing” stage of labour we encourage you to work with your body to help give birth to your baby.

Ideal positions open the pelvic outlet as widely as possible, providing a smooth passage for the baby to descend through the birth canal.


Remember! Use gravity to help you. It will give you a sense of being safe and in control of the process. Imagine you a pushing baby down a hill.

Try out a position for a few contractions. If it works, stay with it. If not, switch to a new position in between contractions. Work with your midwife, they may ask you to move to a specific position just prior to the birth. Work as a team, you are now only a few pushes from meeting your baby.

Semi Sitting




	<p>Pillows behind back and shoulders Sitting up onto your” sit bones” Holding under the thighs Pushing Baby down a hill</p>
	<p>During contractions, wrap your hands around your knees and pull them up towards your shoulders. This also gives the midwife a good view/access to the perineum.</p>

Left Lateral Lying



	<p>Back curved, upper leg supported by partner. May be a comfort position for mum. Introduce gravity with head of bed in elevation. Blood flow to baby maximised in left lateral position.</p>
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Kneeling positions

Only suitable without an epidural. It will help to maximise the effects of gravity. Your midwife will help you to try these positions, and your birthing partner can help you to maintain them.

	<p>Kneeling with arms resting on the head of the bed. Knees comfortably apart. Working with gravity</p>
	<p>Kneeling with one knee up. Comfortable for the mother. Can reduce the risk of episiotomy's and tears. ** Not suitable for PGP mums</p>
	<p>Hands and knees. Arch your back occasionally for increased comfort. Great for back labour, big babies, posterior facing babies. **Not suitable for DRAM mums.</p>

Squatting

	<p>Squatting / Supported Squat. Opens pelvis, gravity enhancing a sense of control for mum. During squatting, the average pelvic outlet is 28% greater than in the supine position. Stand or sit back to relax in between contractions.</p>
	<p>Dangle. Gravity, no external pressure on perineum / pelvis. Feeling of being well-supported. Requires good balance and support from your birth partner.</p>