Labour: When should I go to Hospital?

A Show
- Less than 37 weeks (Call ER and they will guide you)
- More than 37 weeks (Perfectly normal and no need to come to hospital)

Waters Breaking
- Always go to hospital (Your midwife will ask what time your waters broke so please note the time)

Contractions
- Irregular, Mild and not yet 1:5:1 (Stay @ home)
- Regular, strong and coming 1:5:1 (Come to hospital any time from now)

If at any stage you are concerned that baby's normal pattern of movements has changed, if you experience any vaginal bleeding or any of the above signs of labour if less than 37 weeks please attend ER promptly.

Rotunda Ph: 01-8730700
The Stages of Labour...... And What is happening?

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| 1st Stage (Early Labour)  | *Contractions Irregular (not yet 1:5:1)  
* Cervix beginning to efface (thin out)  
* Waters may Break (If so, go to hospital)  
* You might have a show  
* Hormones Involved (Prostaglandin, Oxytocin and Endorphins) | *Contractions are mild  
* Sometimes accompanied with backache  
* Excited, Impatient and Talkative | *Stay @ home  
* Eat light foods  
* Drink plenty of water  
* Breathe deeply with contractions  
* Distraction, Music, Movies, Walking, Birthing Ball, Massage,  
* Paracetamol, Bath and TENS.  
* GO TO SLEEP if you can |
| 1st Stage (Established Labour) | *Contractions are regular (1:5:1)  
* Cervix fully effaced (thinned out) and beginning to open | *Contractions are stronger and longer  
* Contractions are more intense and have become ‘wave-like’ (start off mild, reach a peak and then reduce)  
* Face is flushed  
* Talkative excitement has changed to seriousness and concentration  
* You may feel preoccupied and restless  
* You want companionship | *Come into hospital anytime from now... take your time (A first time Mums cervix opens @ approx. 1cm per hour)  
* Drink plenty of water  
* Breathe deeply with contractions  
* Keep moving  
* Bath (plain water / body temp)  
* TENS  
* Concentrate on one contraction at a time.  
* Remember to pass urine regularly |
| 2nd Stage (Baby being born) | *Dilatation and Effacement are complete (Cervix is now 10cm)  
* Each contraction pushes baby further into birth canal and under the public bone, head will crown, and baby will be born. First head, then body | *Contractions may slow down and change in character  
* May feel an urge to push or bear down  
* Pressure to the rectum  
* Stretching to the perineum which may cause a stinging sensation as baby’s head is born | *’Go with’ your pushing urge- don’t be afraid of the strength and intensity need to bring your baby into your arms  
* Take deep cleansing breaths both before and after contractions  
* LISTEN to your midwife, especially as baby’s head is crowning. She/ He will ask you to STOP pushing to allow baby’s head to birth slowly |
| 3rd Stage (Placenta Being Born) | *Your womb will continue to contract (mild contractions)  
* This will encourage your placenta to shear away from the wall of your womb.  
* Your midwife will assist with delivery by gently guiding the placenta with the cord | *Mild lower abdominal cramping  
* You may notice a small gush of blood vaginally. Let your midwife know if you feel this… it is perfectly normal and is a sign that your placenta has separated from the wall of the womb | *It is common practice in Ireland to actively manage the 3rd stage. This involves giving an injection of oxytocin to minimize the risk of post-partum haemorrhage.  
* Put your baby to the breast to feed. This will encourage the production of oxytocin which helps with the delivery of the 3rd stage |
| After Baby is Born         | BABY: Skin to Skin x 1 hr, First Feed, Head to toe check, Vit K injection, Name and security tags. | MUM: Perineal review and possibly perineal suturing, shower, tea and toast. |

The Rotunda Hospital Dublin