

# Childbirth / Labor



## History

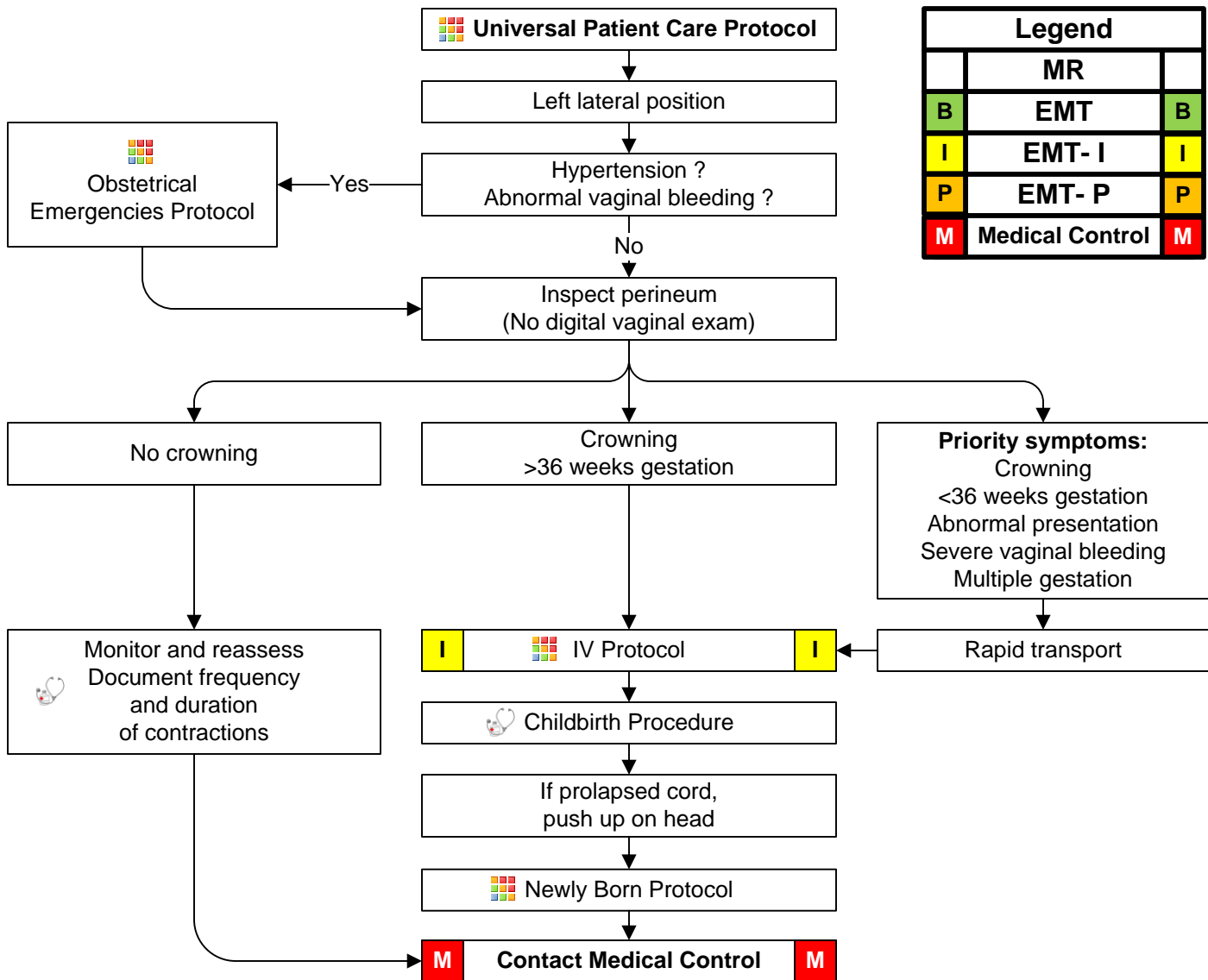
- Due date
- Time contractions started / how often
- Rupture of membranes
- Time / amount of any vaginal bleeding
- Sensation of fetal activity
- Past medical and delivery history
- Medications
- Gravida/Para Status
- High Risk pregnancy

## Signs and Symptoms

- Spasmodic pain
- Vaginal discharge or bleeding
- Crowning or urge to push
- Meconium

## Differential

- **Abnormal presentation**  
Buttock  
Foot  
Hand
- **Prolapsed cord**
- **Placenta previa**
- **Abruptio placenta**



Pediatric and OB Protocols

## Pearls

- **Recommended Exam (of Mother): Mental Status, Heart, Lungs, Abdomen, Neuro**
- Document all times (delivery, contraction frequency, and length).
- If maternal seizures occur, refer to the Obstetrical Emergencies Protocol.
- After delivery, massaging the uterus (lower abdomen) will promote uterine contraction and help to control postpartum bleeding.
- Some perineal bleeding is normal with any childbirth. Large quantities of blood or free bleeding are abnormal.
- Record APGAR at 1 minute and 5 minutes after birth.

## Protocol 38

Any local EMS System changes to this document must follow the NC OEMS Protocol Change Policy and be approved by OEMS

2009