

Balloon catheter

Induction of labour

See flowchart: *Method of induction*

Balloon catheter (BC)

Indications

- MBS ≤ 6
- Preferred cervical ripening agent if previous CS or uterine surgery, grand multiparity or known SGA/FGR
- Following dinoprostone if no/minimal effect on cervical ripening and ARM not technically possible

Contraindications

- Ruptured membranes
- Undiagnosed bleeding
- Abnormal FHR or CTG

Cautions

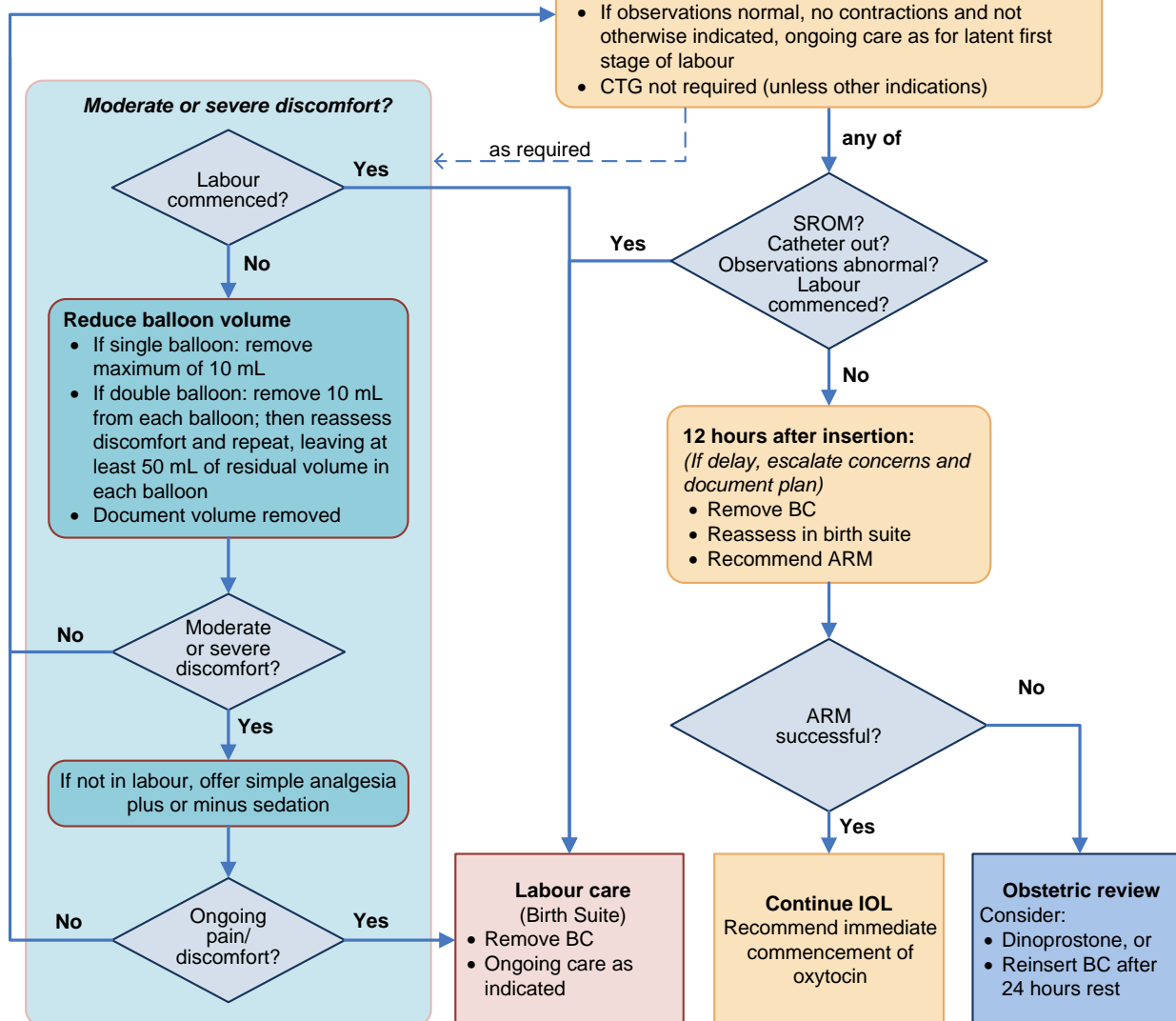
- Fetal head not engaged (4/5 or 5/5 above pelvic brim)
- Polyhydramnios
- Simultaneous use of prostaglandins

Insertion procedure

- Pre catheter insertion:
 - Complete pre IOL assessment complete
 - Encourage to empty bladder
- Performed by medical or midwifery staff:
 - Contact a more experienced clinician if two unsuccessful attempts
- Inflate BC with sterile water or 0.9% sodium chloride:
 - Double balloon: 80 mL each balloon
 - Single balloon: 80 mL
 - Foley balloon: 30-50 mL
- Document inflation volume and time of insertion

Post procedure

- Pulse, BP, FHR, uterine activity, engagement of fetal head and vaginal loss
 - Immediately, and repeat at 30 minutes
 - If malpresentation or fetal head 5/5 palpable after insertion, medical review required
- If observations normal, no contractions and not otherwise indicated, ongoing care as for latent first stage of labour
- CTG not required (unless other indications)



ARM: artificial rupture of membranes; **BP:** blood pressure; **BC:** balloon catheter; **CS:** caesarean section; **CTG:** cardiotocograph; **FHR:** fetal heart rate; **IOL:** induction of labour; **MBS:** modified Bishop score; **SROM:** spontaneous rupture of membranes; **≤:** less than or equal to

