Normal birth—Initial assessment

Care is woman centred and includes informed choice, consent, privacy and respectful communication. Contemporaneous documentation is essential.

Pregnant woman with signs of labour at term

Initial contact

- · Reason for presentation/contact
- · Preferences for labour and birth
- · Emotional and psychological needs

Review history

- Verbal
- · Pregnancy Health Record
- Obstetric, gynaecological, medical, surgical, social
- · Investigations and results
- · Medications and allergies
- Pregnancy complications
- · Psychosocial, cultural and spiritual

Contractions

- · Time commenced
- · Duration, strength, frequency and resting tone

Maternal observations

- · Temperature, pulse, respiratory rate, BP
- Urinalysis
- · Nutritional and hydration status
- · General appearance

Abdominal assessment

- · Observation and palpation
- Fundal height, lie, presentation, attitude, position, engagement/descent, liquor volume

Fetal wellbeing

- · Ask about fetal movements
- Auscultate FHR towards the end of contraction and continue for at least 30–60 seconds after contraction finished
- · Differentiate fetal heart beat from maternal pulse

Vaginal loss

- · Nil, discharge, liquor, blood
- · Note colour, odour, amount, and consistency

Vaginal examination

- If stage of labour uncertain, may assist decision making
- · Consider speculum examination if SROM

Discomfort and pain

- Reassure, promote, reinforce coping strategies
- · Assess response to contractions
- Review birth plan and note preferences
- · Discuss advantages/disadvantages of options

Repeat contacts

- Review entire contact history and clinical circumstances with each contact
- Refer/consult/request woman to present for assessment as required

Discuss, consult, refer, manage as per professional# and Queensland guidelines Yes Risk factors? No Triage stage of labour Not yet in labour Antenatal assessment First stage Refer to flow chart: Normal Birth—First stage Second stage Refer to flow chart: Normal Birth—Second stage

BP: blood pressure, **FHR:** fetal heart rate, **VE:** vaginal examination, **SROM:** spontaneous rupture of membranes "Australian College of Midwives: National midwifery guidelines for consultation and referral. 3rd Edition, Issue 2. 2015

Queensland Clinical Guidelines: Physiological birth Flowchart version F17.25-1-V2-R22

