CHILDBIRTH - ALS

RMC

Obtain patient history and document any of the following:
1. Rectal pressure
2. Contractions less than or equal to 2 minutes apart
3. Uncomfortable and unable to ambulate
4. Vaginal bleeding
5. Ruptured membranes
6. Uncontrollable urge to push

Any of the above present?

Yes

Check for crowning

Crowning present?

Yes

Prepare for birth

Control delivery of head with palm of hand so it does not emerge too quickly

Check for cord around the neck
If present, refer to Nuchal Cord protocol

Guide head and neck as upper shoulders are delivered

Support baby as body delivers

See Post-Delivery Care protocol on the next page

No

Monitor for above

Time contractions

Contact Medical Control and transport to ED with an approved OB facility

No

Place patient on left side

Time contractions

Contact Medical Control and transport to ED with an approved OB facility

Check for cord around the neck
If present, refer to Nuchal Cord protocol

Guide head and neck as upper shoulders are delivered

Support baby as body delivers

See Post-Delivery Care protocol on the next page
POST-DELIVERY CARE - ALS

BABY

Note time of delivery

PRMC

Keep newborn level with mother’s vagina until cord clamped

Wipe face

Dry and wrap warmly in blanket

Clamp umbilical cord securely in two places about 6-8” from baby and cut between 2 clamps

If non-vigorous or in respiratory distress, proceed to Neonatal Resuscitation protocol

Assess Apgar score at 1 and 5 minutes after birth (see next page)

MOTHER

RMC

Maintain BP ≥ 90
Establish vascular access, if indicated
NS wide open 300 ml bolus
Repeat as indicated

If placenta delivers, note time of delivery and place in a plastic bag
Do not delay transport waiting for placenta
Do NOT pull on cord to facilitate placenta delivery

If heavy vaginal bleeding, gently massage uterus with your hand on abdomen

If perineum is torn or bleeding, apply direct pressure with trauma dressing

Contact Medical Control and transport to ED with an approved OB facility
### APGAR SCORING

<table>
<thead>
<tr>
<th></th>
<th>0</th>
<th>1</th>
<th>2</th>
<th>1 Min</th>
<th>5 Min</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>A</strong>&lt;br&gt;Appearance (color)</td>
<td>Blue, pale</td>
<td>Blue hands and feet</td>
<td>Entirely pink</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>P</strong>&lt;br&gt;Pulse (heart rate)</td>
<td>Absent</td>
<td>&lt;100/min</td>
<td>≥100/min</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>G</strong>&lt;br&gt;Grimace (reflex irritability)</td>
<td>No response</td>
<td>Grimace</td>
<td>Cough or sneeze</td>
<td></td>
<td></td>
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<tr>
<td><strong>A</strong>&lt;br&gt;Activity (muscle tone)</td>
<td>Limp</td>
<td>Some flexion of extremities</td>
<td>Active motion</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>R</strong>&lt;br&gt;Respiratory effort</td>
<td>Absent</td>
<td>Weak cry, hypoventilation</td>
<td>Good, strong cry</td>
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TOTALS =