Maternal, Newborn, Child & Youth Network

NAME OF HOSPITAL: _____

SUMMARY OF BIRTH

KEY: **SHADED AREAS** COMPLETED BY RN/RM. **WHITE AREA** COMPLETED BY MD/RM
USE BALL POINT PEN. PRESS FIRMLY.
PLEASE USE "GUIDELINES FOR COMPLETION OF SUMMARY OF BIRTH".
OBSTETRICAL RISK FACTORS REFERENCE GUIDE ON REVERSE SIDE OF COMPLETE FORM.

GTPAL: _____
EDB (YYYY/MM/DD): _____
Gestational age: ____ wks ____ days
Blood type: _____ Rh: _____
☐ Rh Immunoglobulin
No. of previous C/S: _____

Risk Factors:
(see reverse side of complete form)

Membrane Rupture:
☐ Spontaneous ☐ Artificial
☐ At Caesarean Section
☐ Clear ☐ Bloody
☐ Meconium

GBS: ☐ Positive ☐ Negative ☐ Unknown
GBS Prophylaxis:
☐ Yes ☐ No ☐ Incomplete

Antibiotics for other indications:
☐ Yes ☐ No
Indication: _____

☐ **Induction**
Indication: _____

☐ Cervical ripening required
☐ Cervical Foley Catheter
☐ Prostaglandin

☐ **Augmentation**
Indication: _____

	Induction	Augmentation
ARM	☐	☐
Oxytocin	☐	☐

Fetal Health Surveillance
☐ Intermittent auscultation
☐ Cont. Fetal Monitoring:
☐ External
Indication: _____
☐ Internal
Indication: _____
☐ FSE ☐ IUPC ☐ Scalp Sample
☐ Other: _____

Pain Relief: ☐ None
☐ Non-pharmacologic (include massage, hydrotherapy, relaxation techniques, etc)
☐ Sterile H_20 ☐ Local
☐ Narcotic ☐ Pudendal
☐ Nitronox ☐ PCA
☐ Epidural ☐ CSE
☐ Spinal ☐ Other:
☐ General _____

PRESENTATION:
Vertex: ☐ Occ. Anterior R/L
☐ Occ. Posterior R/L
☐ Occ. Transverse
☐ Face ☐ Brow
☐ Compound
☐ Other: _____

Breech: ☐ Frank
☐ Footling
☐ Complete
☐ Incomplete
☐ Other: _____

Transverse/oblique: ☐

BIRTH: Vertex
☐ Spontaneous
☐ Occiput Anterior
☐ Occ. Posterior
☐ Other: _____
☐ Shoulder Dystocia
☐ Vacuum Extraction
☐ Forceps
Indication:
☐ Low ☐ Mid ☐ Outlet
☐ Rotation ____ to ____
☐ Failed

Breech
☐ Spontaneous
☐ Assisted ☐ Extraction
☐ Forceps to ACH
☐ External Version
☐ Internal Version

VBAC
☐ Successful ☐ Failed

Caesarean Section
Indication:
☐ With or ☐ Without Labour
☐ Low Segment (transverse)
☐ T-incision ☐ Vertical

Cord ☐ No complications
Vessels: ☐ 2 ☐ 3
☐ Around neck x _____
☐ Around body x _____
☐ True knot x _____
☐ Prolapse
☐ Other: _____

Delayed Cord Clamping Attempted:
☐ Yes ☐ No ☐ Unknown
If yes: ☐ <30 secs
☐ 30-44 secs
☐ >45 secs
☐ Timing unknown

Placenta
Weight: ____ gm or ☐ N/A
☐ Spontaneous
☐ Retained ☐ D & C
☐ Manual removal
Uterus Explored:
☐ Yes ☐ No
☐ Sent to pathology
☐ Abnormalities:
_____

Blood Loss at Birth
☐ < = 500 mL
☐ > 500 mL _____ mL
☐ Uterine atony
☐ Laceration
☐ Uterine rupture
☐ Other: _____

Laceration ☐ None
☐ Perineal: ☐ 1° ☐ 2° ☐ 3° ☐ 4°
☐ Vaginal ☐ Cervical
☐ Other: _____
Repaired: ☐ Yes ☐ No

Episiotomy ☐ Yes ☐ No
Indication:
☐ Median
☐ Mediolateral R/L
☐ Extension ☐ 3° ☐ 4°

Sponge Count
In: _____ Out: _____
Needle Count
In: _____ Out: _____
Instrument Count
In: _____ Out: _____

Chronology

	Date	Time
Membrane Rupture		
Induction		
Oxytocin Started		
Active Labour Onset		
Augmentation		
Full Dilatation		
Birth of Infant		
Placenta		

Oxytocin at Birth:

Date	Time	Amt	Route	Initial

Apgar

	1 MIN	5 MIN	10 MIN
Skin Colour			
Heart Rate			
Reflex Irritability			
Muscle Tone			
Respiration			
TOTAL			

Cord Blood Gases sent: ☐ Yes ☐ No
ABO/Rh/Direct Antiglobin sent: ☐ Yes ☐ No

Newborn Care: ☐ NRP Initial Steps Only
☐ Advanced Resuscitation (See Resuscitation Record)
Infant Wt: _____ gm _____ lb _____ oz
☐ Female ☐ Male ☐ Ambiguous
☐ Congenital abnormality known
☐ ID bracelet applied No: _____
☐ Security bracelet applied (if applicable)
☐ Breastfeeding ☐ Breastfeeding Initiated
☐ Urine ☐ Meconium
Infant MD/RM: _____
Transferred:
☐ Remains in LBRP ☐ Mother/Baby Unit
☐ Home ☐ SCN ☐ NICU ☐ PCCU
Comment: _____
Professional Staff Present:
☐ Paediatrician ☐ Neonatal Transport Team
☐ NICU Consultant ☐ NICU Support Staff
☐ Anesthesiology

MD/RM: _____ PRINT
Signature: _____
Assistant: _____ PRINT
Signature: _____
RN(s): _____ PRINT
Signature(s): _____
_____
Other (PRINT/SIGNATURE): _____
Date (YYYY/MM/DD): _____

DISTRIBUTION: ORIGINAL - Patient's Chart 2nd COPY - Infant's Chart 3rd COPY - Database 4th COPY - Birthing Unit

OBSTETRICAL RISK FACTORS REFERENCE GUIDE

PREVIOUS PREGNANCY

- Abnormally Adherent Placenta (Accreta, Increta, Percreta)
- Antepartum Hemorrhage (placental previa, abruption)
- Cesarean Section (low segment, classical, T or J incision)
- Child with handicap
- Diabetes
- Fetal Anomaly (specify)
- GBS Sepsis
- Hypertension (chronic, gestational)
- Isoimmunization
- IUGR
- LGA (> 4500 gms)
- Postpartum Hemorrhage
- Precipitous Birth
- Preterm Birth
- Shoulder Dystocia
- Stillbirth, Neonatal Death

CURRENT PREGNANCY

MATERNAL DATA

- Alcohol use
- Amniocentesis (specify indication)
- Anemia not responding to iron (Hgb < 100 g/L)
- Chronic / Acute Medical Disease (specify)
- Genetic Disease (specify)
- Grand Multiparity
- HIV, STD
- Inadequate prenatal care (< 4 visits@36 wks)
- Inadequate weight gain (< 10 lbs by 30 wks)
- Maternal Obesity (20% > ideal weight)
- No prenatal care
- Psychiatric illness
- Psychosocial Problems (eg. abuse, poverty)
- Smoking
- Substance abuse

Carbohydrate Disorders:

- Carbohydrate intolerance of pregnancy (1 abnormal value on 75 gram oral GTT)
- Gestational diabetes, diet controlled
- Gestational diabetes, insulin controlled
- Overt diabetes

Hypertensive Disorders:

- Pre-existing hypertension (essential or secondary)
- Gestational hypertension: • Superimposed on chronic
  - Without proteinuria • With proteinuria
  - Elevated liver enzymes, low platelets, DIC, epigastric pain, visual disturbance, hyperreflexia, frontal headache, other (specify)
- HELLP • Eclampsia

Isoimmunization:

- Anti-D
- Other (including C, E, Kell, JKA, Duffy, etc.)

Multiple Gestation: • Twins, triplets, other

- Multiple gestation with fetal loss & retention of one live fetus
- Chorionicity: monozygotic, dizygotic, unknown
- Twin-twin transfusion • Growth Discordance

Preterm labour (< 37 weeks):

Antenatal steroids • Incomplete course • Complete course • Course repeated

Antepartum / Intrapartum Bleeding:

- Abruption: mild, moderate, severe, chronic
- Previa: marginal, partial, complete, low lying placenta
- Coagulopathy (D.I.C.)
- Other antepartum hemorrhage

Spontaneous Prelabour Rupture of Membranes

Indicate duration of rupture prior to onset of labour:

- < 6 hours 6-24 hours > 24 hours

Chorioamnionitis: (clinical diagnosis)

Group B Strep: +ve, -ve, not cultured/unknown

- Antibiotic prophylaxis

Uterine Conditions:

- Fibroids
- Uterine anomaly
- Surgery (exclude prev c/s)
- Other

Other Maternal Conditions:

- Intrapartum fever (> = 38˚C on 3 readings over 6 hours)
- Maternal cardiac condition
- CPD: relative, absolute

Infection:

- Chicken Pox • CMV • HPV
- Parvo B19 • TB • Herpes
- Hepatitis • HIV • Other STD
- Vaginosis • Other

FETAL DATA

Growth Disorders

- LGA - First noted prenatally
  - First noted postnatally
- IUGR - First noted prenatally
  - First noted postnatally
- Polyhydramnios
- Oligohydramnios

Other Conditions

- Hydrops: Immune, Non-immune
- Fetal anomaly known prenatally
- Shoulder dystocia

Fetal Well-Being

Antenatal conditions leading to delivery:

- Non-reactive non-stress test
- Abnormal biophysical profile score
- Spontaneous decels

Intra-partum non-reassuring FHR patterns:

- Fetal tachycardia
- Fetal bradycardia
- FHR decelerations: late, variable
- Decreased FHR variability

Meconium evident: thin, thick