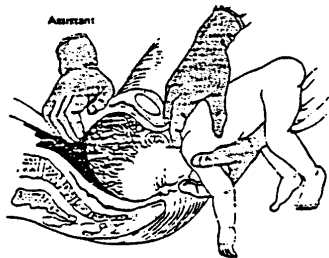


COMPLICATIONS OF DELIVERY

BREECH DELIVERY:

1. Administer high flow O_2 .
2. If breech obvious, transport patient ASAP.
3. Place mother in the supine or Trendelenburg position.
4. If delivery occurs during transport:
 - I. Allow mother to push. Gently extract baby. Do not pull.
 - II. Support delivered body and extremities on your hand and arm.
 - III. If head not delivered, place gloved hand in vagina to form a "V" around baby's mouth and nose, should it begin to breathe.
 - IV. Perform the Mauriceau maneuver to deliver the head (see Figure 5.1):
 - ✓ Fingers of left hand inserted into infant's mouth or over mandible
 - ✓ Fingers of right hand curved over infant's shoulders
 - ✓ Assistant exerts suprapubic pressure on head

Fig. 5.1: Mauriceau



PROLAPSED CORD:

1. Administer high flow O_2 .
2. Place mother in knee-chest position or extreme Trendelenburg.
3. Insert gloved hand into vagina, and gently lift head/body off of the cord.
4. Observe cord for pulsations, and continue until relieved by hospital staff.

CORD WRAPPED AROUND NECK:

1. Gently attempt to loosen cord.
2. With 2 fingers behind the baby's neck, try to slip the cord forward over the baby's upper (anterior) shoulder and head. If unsuccessful, attempt to slip under lower shoulder and over head.
3. If unsuccessful, clamp cord with 2 clamps, cut between clamps and carefully unwrap cord from around the neck.
4. Assist delivery.

PLACENTA PREVIA/ABRUPTIC PLACENTA:

1. Administer high flow O₂.
2. Apply cardiac monitor.
3. Administer IV of NS. If hypovolemic, perform trial of volume infusion and apply Military Anti-Shock Trousers (MAST), legs only, as needed.
4. Contact receiving hospital via the HEAR system en route.

POSTPARTUM HEMORRHAGE:

Early: Usually due to uterine atony or tears of the cervix

Late (7-10 days): Retained placental parts

1. Administer high flow O₂.
2. Apply cardiac monitor.
3. Administer large bore IV of NS.
4. If hypovolemic:
 - I. Perform trial of volume infusion.
 - II. Apply MAST (legs only) as needed.
 - III. Perform external uterine massage (elevate and firm pressure).