### WHO LABOUR CARE GUIDE

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### ASSESSMENT

#### Oxytocin (U/L, drops/min)

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<th>IV fluids</th>
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#### Baseline FHR

- <110, ≥160

#### FHR deceleration

- L

#### Amniotic fluid

- M++, B

#### Fetal position

- P, T

#### Caput

- +++

#### Moulding

- +++

#### Contractions per 10 min

- ≤2, >5

#### Duration of contractions

- <20, >60

#### Cervix (Plot X)

- 10
- 9 ≥2h
- 8 ≥2.5h
- 7 ≥3h
- 6 ≥5h
- 5 ≥6h

#### Descent (Plot O)

- 5
- 4
- 3
- 2
- 1
- 0

#### Urine

- P++, A++

### LABOUR PROGRESS

#### In active first stage, plot ‘X’ to record cervical dilatation. Alert triggered when lag time for current cervical dilatation is exceeded with no progress. In second stage, insert ‘P’ to indicate when pushing begins.

### LABOUR ONSET

- Time:
- Hours:
- 1 2 3 4 5 6 7 8 9 10 11 12

### Ruptured membranes

- Date: [ ]

### Risk factors

- Companion
- Pain relief
- Oral fluid
- Posture

### MEDICATION

- Companion
- Pain relief
- Oral fluid
- Posture

### SUPPORTIVE CARE

- Baseline FHR
- FHR deceleration
- Amniotic fluid
- Fetal position
- Caput
- Moulding
- Contractions per 10 min
- Duration of contractions
- Cervix (Plot X)
- Descent (Plot O)
- Urine

### SHARED DECISION-MAKING

- Companion
- Pain relief
- Oral fluid
- Posture

### INITIALS

- Name
- Parity
- Labour onset
- Active labour diagnosis

### INSTRUCTIONS: CIRCLE ANY OBSERVATION MEETING THE CRITERIA IN THE ‘ALERT’ COLUMN, ALERT THE SENIOR MIDWIFE OR DOCTOR AND RECORD THE ASSESSMENT AND ACTION TAKEN. IF LABOUR EXTENDS BEYOND 12H, PLEASE CONTINUE ON A NEW LABOUR CARE GUIDE.

**Abbreviations:**