At your 39 week appointment your care provider informs you he will be on vacation next week and will not return until you are nearing 41 weeks. He will be on call for one more shift. He asks if you would like to be induced so he doesn’t miss the birth.

How do you respond?

Partner, if you are at the appointment, how do you respond?

What does evidence say?

At your 38 week appointment your care provider asks to perform a vaginal exam to “just see if there is anything going on in there”.

How do you respond?

Partner, comments?

What does evidence say?

You are 40 weeks and 4 days your provider sends you over for a biophysical profile because you are overdue and she wants your amniotic fluid levels checked. She thinks baby has dropped.

How do you respond?

Partner, comments?

What does evidence say?
Your water has been trickling since noon, but you are not having very many contractions. Baby is moving well, you are staying hydrated and have no sign of infection. You are 41 weeks pregnant. Your care provider told you if your water breaks go right to the hospital.

What do you do?

Partner, how do you respond?

What does evidence say?

You are being induced for pre-eclampsia. You are 39 weeks pregnant, 1 cm dilated and 50% effaced. Your care provider wants to use cytotec, followed by pitocin and AROM.

How do you respond?

Partner, how do you respond?

What does evidence say?

You are laboring along slow but sure. Early labor is taking awhile. Your contractions change and seem stronger. You go to the hospital and are 5 centimeters. Baby looks good on the monitoring in triage, so you are assigned a room. The labor and delivery nurse would like you to stay in bed and not move around or get into the shower/tub. That is ALL you want to do.

How do you respond?

Partner, what do you do?

What does evidence say?
You arrive at the hospital 4 cm’s thinking your water is broken. Your water is not broken, it is very watery mucous. Your care provider would like you to stay and walk a bit. Your contractions are every 5 minutes and about 45 seconds long. After walking the halls for an hour, you are a stretchy 4 cm’s and contractions are the same. The nurse wants to admit you and start pitocin then break your water “to get things moving”. You know you are still in early labor and don’t mind waiting for nature to handle it. You really want to go back home.

How do you respond?

Partner, what do you do?

What does evidence say?

You are 8 cm’s dilated and contractions are coming strong and frequently. During the routine monitoring, baby shows some minor deceleration in heart rate after the contraction. You have been leaning forward sitting on the ball. The nurse tells you get ready for a cesarean. You haven’t seen your care provider.

What do you do?

Partner, how do you respond?

What does evidence say?

You are 37 years old, 30 weeks pregnant, in great health, and the pregnancy has been very by the book. Your care provider tells you that at 34 weeks she is going to start doing ultrasound scans weekly to check the baby since you are advanced maternal age. She then says she will induce you at 39 weeks if you haven’t gone into labor yet. She tells you that your baby very well could die if you go longer than 39 weeks.

What do you do?

Partner, how do you respond?

What does evidence say?
You are complete and getting an urge to push. Everything in you says you need to squat and push when you feel like it. The nurse tells you that it is impossible to birth a baby that way and wants you to only push in the semi-reclined or c-position while holding your breath each push. This feels totally wrong to you.

What do you do?

Partner, how do you respond?

What does evidence say?

You have been assured that after your push out your baby, he will be placed right on your belly or chest for assessments even if he needs oxygen without separating you two. After you birth your baby, he is making good effort to breathe, is vocalizing, and his color is just right. The baby nurse wants to take him right away. You ask her to do all his assessments on you and she says no and without your consent takes him off to the warmer.

What do you do?

Partner, how do you respond?

What does evidence say?

A cesarean is suggested to you after your baby unexpectedly flips to a breech position at 39.5 weeks. After a second opinion, you find out that your baby is in a complicated star gazing complete breech. You call your doctor and agree to the cesarean. Your doctor plans it for the following morning and tells you since it is planned, you can only have a spinal for the surgery. You prefer an epidural due to the side effects of the spinal anesthesia.

What do you do?

Partner, how do you respond?

What does evidence say?