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To use the Text Relay service, prefix all numbers with 18001.

اگر نیاز به ترجمہ دارید، لطفاً با شماره 01932 723553 تماس بگیرید۔

ਜੇ ਤੁਹਾਨੂੰ ਤਰਜਮੇ ਦੀ ਲੋੜ ਹੈ ਤਾਂ ਕਿਰਪਾ ਕਰਕੇ ਇਸ ਨੰਬਰ ਤੇ ਫੋਨ ਕਰੋ: 01932 723553

اگر آپ اس کا اردو زبان میں ترجمہ چاہتے ہیں، تو براہ کرم اس فون نمبر 01932 723553 پر رابطہ کریں

Se precisa de uma tradução por favor contacte: 01932 723553

আপনার অনুবাদের দরকার হলে এখানে যোগাযোগ করুন : 01932 723553

यदि आपको अनुवाद की ज़रूरत है तो कृपया इस नंबर पर फोन करें: 01932 723553

Jeżeli chcemy, aby te informacje w innym języku, proszę zadzwonić 01932 723553

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Outpatient Induction of Labour for Low Risk Pregnancy

Maternity Department



Induction of labour

Induction of labour (IOL) is the process of helping your body to start labour. We offer induction of labour either in hospital or as an outpatient.

This leaflet gives you information about **Outpatient Induction of Labour**.

Outpatient Induction of Labour is the process of induction that starts in the hospital maternity unit for women with low risk pregnancies who are then discharged to home and return to hospital for the birth of their baby.

Why have an Outpatient Induction of Labour?

An Outpatient Induction of Labour:

- Reduces the amount of time you will need to stay in hospital before your labour begins
- Allows you to stay at home and wait for labour to start
- Allows your birth partner to remain with you through all of the induction process
- Makes the process of induction feel less medicalised

Who can have Outpatient Induction of Labour?

You will be offered an Outpatient Induction of Labour if:

- You have a 'low-risk' pregnancy and are overdue by more than 10 days
- You have no relevant medical or obstetric problems
- You have not had any uterine surgery
- You have had no bleeding after 24 weeks of pregnancy
- You have a telephone

Useful Contact Numbers The Abbey Birth Centre (ABC)

01932 723761

Joan Booker Ward

01932 722291

01932 722378

01932 722660

Maternity Triage

01932 722835

Useful links:

1. National Institute for Health and Care Excellence. Clinical Guideline 'Inducing labour'.
<https://www.nice.org.uk/guidance/cg70/resources/inducing-labour-975621704389>
2. National Institute for Health and Care Excellence. Information for the public 'Induction of labour'.
<http://www.nice.org.uk/guidance/cg70/resources/induction-of-labour-313461649861>
3. National Institute for Health and Care Excellence. Clinical Guideline 'Intrapartum care for healthy women and babies'.
<https://www.nice.org.uk/guidance/cg190/resources/intrapartum-care-for-healthy-women-and-babies-35109866447557>

Further Information

We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.

If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email patient.advice@asph.nhs.uk. If you remain concerned, the team can also advise upon how to make a formal complaint.

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- You have any fresh bleeding
- Your baby's movements are reduced
- The Propress falls out or drops lower in the vagina

What happens when I go home?

The Propress works by 'ripening' the cervix (neck of womb) - this means that the cervix softens, shortens and begins to open. You will commonly feel a period type pain while this happens but sometimes tightening of the womb can occur and even labour can start. It is advisable to stay at home during this time and we recommend that you take Paracetamol and have a warm bath, but if the contractions become distressing or come every 5 minutes or less you should phone Maternity Triage and come in to be assessed.

Are there any side effects?

Propress can occasionally produce some side effects which are usually mild and include nausea, vomiting, dizziness or rarely palpitations and fever. If any of these occur to a distressing level you should phone Maternity Triage.

There is a very rare chance that you may be very sensitive to Propress and start contracting very frequently and strongly:

- More than 5 times in 10 minutes
- A run of contractions each lasting more than 2 minutes
- Severe abdominal pain

If this happens you must phone The ABC and attend the unit immediately.

If you have any further questions regarding outpatient induction of labour please speak to your community midwife.

- You have an adult who will be with you at all times
- You have transport to bring you to the hospital
- You live within a 30 minute drive from the Hospital

Your midwife will have a discussion with you about the Outpatient Induction of Labour process and if you meet all of the criteria you will be offered this method of induction.

What happens on the day?

Your midwife will book an appointment for you to attend the **Maternity Day Assessment Unit (MDAU)** on ground floor in Abbey Wing at St Peter's Hospital at **07:30am** for your induction of labour.

Please remember to bring your hospital notes with you and an overnight bag in case you do need to stay in hospital.

Outpatient Induction of Labour

Step 1:

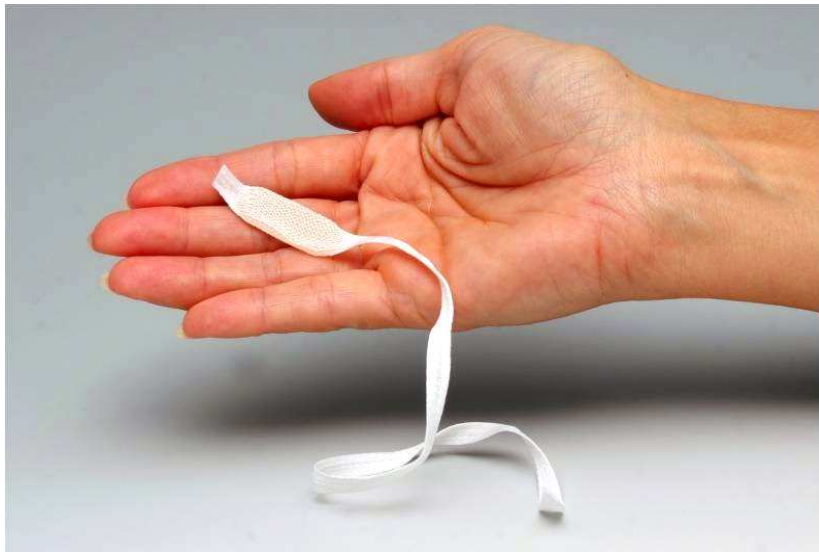
When you arrive at MDAU you will have your pulse, blood pressure, temperature and urine checked by a Midwife or Maternity Care Assistant.

The midwife will read your notes and confirm that you are suitable for outpatient induction of labour. She will also discuss the process of induction with you and answer any questions you may have.

The midwife will examine and measure your abdomen to check your baby's size and the way the baby is laying. She will also check that your baby is well by monitoring the baby's heart beat on a Cardiotocograph (CTG) machine for about 30 minutes.

Step 2:

When the midwife is happy with the observations and the CTG monitoring, she will perform an internal examination (vaginal examination) to check the neck of the womb (cervix). If the cervix is open you will be admitted for Artificial Rupture of Membrane (ARM) or Prostin vaginal gel. If the cervix is closed, the induction medicine called Propess will be inserted into the vagina. Propess is a flat small pessary which contains prostaglandin (a naturally occurring female hormone) which will remain in your vagina for about 24 hours whilst it slowly releases the hormone to soften and thin out the neck of the womb. It is attached to a small tape so that it can be easily removed.



After the Propess is inserted you will need to lie in bed for 30 minutes with a continuous CTG monitoring of your baby's heart. During this time the Propess will absorb moisture from your vagina like a tampon which makes it swell slightly and settle into place. This reduces the chance of it falling out.

The Propess string will lie just outside of your vagina and it is important that you do not pull or drag on it. You will need to take care when wiping yourself, after going to the toilet, after washing and getting on and off the bed.

Step 3:

When the CTG recording has completed the midwife will assess the monitoring. If it is a normal recording you will be taken to the Abbey Birth Centre (ABC) for refreshments, we ask you to stay with us for 30 mins. You will be given the opportunity to ask any questions and if there are no concerns you will be able to go home.

The time of insertion and planned removal of Propess will be clearly documented by the midwife in your hand held notes.

Step 4:

You can continue with your day-to-day activities and eat and drink as normal. We encourage you to be as mobile as possible.

Please also monitor your baby's movements.

Step 5:

If there are no concerns you will stay at home overnight and will be advised to return to Joan Booker Ward between **08:30 to 09:00 am** the following morning (**24 hours** after Propess insertion time as documented in your notes). A midwife will remove the Propess from the vagina and assess changes to the cervix.

Contact the ABC immediately on 01932 723761

If you experience any of the following:

- You think your waters have broken
- You have regular and painful contractions or constant pain