



**TANNER  
CLINIC**

**HOSPITAL  
PRE-  
REGISTRATION**



***Once you have entered your third trimester, please pre-register by phone with the hospital where you plan to deliver:***

**DAVIS HOSPITAL  
& MEDICAL CENTER**

1600 West Antelope Drive  
Layton, UT 84041  
801.807.7089



**INTERMOUNTAIN  
LAYTON HOSPITAL**

201 Layton Parkway  
Layton, UT 84041  
801.442.8600

# SOME THINGS TO THINK ABOUT WHILE IN LABOR

The labor process is different for everyone, some would like to go unmedicated where others would like an epidural. Some women have considered an extensive birth plan while others are ok with seeing what options are available on the day. This may be your first baby or you have been here a few times before. The important thing to remember is to be understanding to change and to listen to the options and plans available to provide you with the best care for you and your baby.

## EATING AND DRINKING

If you have the chance, be sure to eat a small simple meal prior to going to the hospital. If you go into labor on your own this may not be the first thing you are thinking about. Once you are at the hospital food and drinks will be limited due to risks involved if general anesthesia is needed. You will be offered ice chips, popsicles, suckers, jello, broth and other clear liquid type foods. While in active labor fluids can cause a lot of nausea and discomfort so small sips are encouraged but don't down the drinks. If you have a favorite hard candy I encourage you to pack some in your hospital bag so you can have something you know you enjoy.

## IUPC/FSC

During labor, it may become apparent, that for certain reasons internal monitors are needed to trace your contraction pattern and/or your baby's heart tones. An intrauterine pressure catheter (IUPC) is a tube-like device that is inserted through the cervix then up alongside the baby's head. It will measure the timing and strength of your contractions, helping us to monitor the progress of your labor. If it becomes difficult to monitor your baby's heart rate while in labor or if there is a need to be monitoring a little closer, then a fetal scalp electrode (FSE) will help. This is a small pin like coil that will be placed on the top of the baby's head and will give us a direct reading of your baby's heart tones.





## AMNIOTOMY (breaking your water)

If your bag of water does not break on its own, it may be necessary for me to do an Artificial Rupture Of Membranes (AROM) or “break your water”. There usually is no urgency to do this but it may be helpful in getting labor to progress a little faster. Breaking your water is necessary for the above monitoring devices to be placed as well.

## AMNIOINFUSION

If your baby is showing signs of not tolerating contractions, as seen on the fetal monitor, an amnioinfusion may be an intervention that will help relieve some stress on the baby. Once your water breaks that cushion around your baby is gone and your contractions will have a stronger impact on your baby. By using the IUPC we can infuse fluid back into the uterus to sort of give cushion back to the umbilical cord and reduce some of the signs of stress the baby is exhibiting.

## PAIN MANAGEMENT

Think about what type of labor and birthing experience you want. If unmedicated is your plan be sure to do your homework and find a method that is best for you and your partner or support team. Attend classes or read books about methods you are interested in. I enjoy helping patients through this type of labor if this is something you want to do. I have many tips and tricks that we can discuss and get you through. If you planned to have an epidural this is a great option as well. Anesthesia is available 24 hrs. a day to provide this type of pain management. I still have tips and tricks for this labor method as well to make sure you are as comfortable as possible while still making sure the labor process is successful.

IV pain medications are an option as well for a little while. Because they are typically narcotics and given through the IV, they will have a small effect on your baby. Because of this we have to watch how often you get them and the timing to delivery (how dilated) you are to reduce the risks it has on your baby. Please ask about this if you have questions so we can discuss it further.



## DELIVERY PROCESS

A noninvasive vaginal delivery is always my first priority and goal, however, we may have to take factors into consideration during the labor process. Know that what is the best way to get a healthy baby here safely and what is safest for you is most important. Sometimes a cesarean section is an answer but will not be something I jump straight to unless it is an emergency for your health or your baby's health. This will be discussed if it presents itself.

Along with a vaginal delivery comes the possibility of tearing at the time of birth. Many people ask about an episiotomy. Episiotomies are not standard practice as natural tearing offers a better outcome. This being said if it came down to the health of your baby an episiotomy could be considered.

Another intervention that could present is the need to use a vacuum or forceps. There are different reasons to use this and will be discussed with you at that time if it is needed. If this looks like it may be needed an OB/GYN will come in to help with this. Know that these situations are "as needed" interventions and will be discussed with you to consider your options.

## AFTER THE BIRTH OF YOUR BABY

There are a few options to consider after your baby is born for you to consider. One of these options is to do delayed cord clamping. It is standard practice to do at least 1 minute of delayed cord clamping. Please talk to me about other options or longer delays.

Another option you will have at this point is to do immediate or delayed skin to skin. This is a great opportunity for you to help your baby regulate and help their little systems regulate. Again please ask me or your labor nurse questions about this and benefits involved.

While you are recovering and your baby is in those first transition hours you will be offered "eyes and thighs". This included the administration of Vitamin K, Hepatitis B Vaccine and Erythromycin to your baby. Please talk to me if you have questions about this process including the why's and benefits to your baby. I recommend using at least the first hour after delivery to do skin to skin and breast feed your baby, if that is your choice of feeding method. In that first hour is when your baby will be most active and alert and will start to establish patterns. As wonderful as it is to pass the baby around and let everyone snuggle for the first time, please know that this is also the time that your baby naturally needs you prior to hitting a sleepy period. Use it for you and let others snuggle a little later.

**If you have any questions about this information or other things you would like to discuss let me know. I want to help you be as involved and informed as possible to make this experience the best it can be for you and your family!!!**