

## Emergency Childbirth

When you hear the words emergency childbirth you might think of old police shows with mom giving birth in the bathroom with her older child being talked step-by-step through the birth by the operator on the 9-1-1 call. Or you might picture being stuck in a cabin in a snow storm with only your partner as the soap operas would have you believe.

Either way the thought has probably crossed your mind that you might be one of these women. First of all, let me tell you that this is very unlikely. Secondly let me reassure you that when birth happens this quickly it's usually because everything is going very well (Unless you're preterm.).

Women delivering at a hospital or birth center may fear a rapid labor, or rush hour traffic for their trip. Women who are giving birth at home may fear that their practitioner won't arrive in time to catch the baby. No matter which you are it's a good idea to talk to your midwife or doctor about your fears. They can give you a few simple instructions and help calm your nerves.

### What to do!

When you read these instructions you will find that they read more as a list of what **not** to do. That's because childbirth is a normal event, and rarely an illness.

1. Don't panic. Remaining calm can help you focus on the birth, even if you are alone.
2. Call your midwife (or doctor), or 9-1-1 if you are able. If you are in your car, pull over and put on your blinkers. No use killing everyone by driving wildly, you're much safer having the baby in the car while it's stopped.
3. Remind mother to try to pant, or only push very gently with the contractions.
4. As the baby's head becomes visible, place your hand on the head and provide it with support to keep it from popping out. Remind mother to try and pant during this part to help prevent tearing. If you're alone, simply place your hands over the baby's head as best as possible.
5. **Do not pull on the baby or its head!** You may gently guide the baby out.
6. Gently stroke downward on the baby's nose to help expel the excess mucous and amniotic fluid. This may be done with a clean cloth or simply with your hand.
7. Place the baby skin-to-skin on mom, with the baby's head slightly lower than his/her body (to help facilitate draining the mucous). Cover both of them with warm dry blankets or towels. Keep the mother warm (with blankets if necessary), baby skin to skin and covered with a baby blanket or towel.
8. **Don't cut or pull on the umbilical cord! Do not rub or push on the mother's uterus while the placenta is still inside!**
9. If the cord is long enough have mother nurse the baby. This will help expel the placenta and should cut down on postpartum bleeding.
10. If the placenta is born before help arrives, place it next to the baby, again do *not* cut the cord unless it is absolutely necessary. You can place it in a bed pad or a bowl. Keep it approximately the same level as the baby, but not lower or higher than the baby. If for any reason it becomes necessary to cut the cord, use two cord clamps about 2 inches apart any where between the baby and the placenta. After clamping a cord clamp, do not remove it. Use the sterile scissors to cut *between* the two clamps. It is not necessary to cut the cord close to the baby. In fact, it is easier if you leave several inches on the baby's side. The cord can always be shortened later by a doctor or midwife.
11. Keep mom and baby safe until the practitioner arrives, or until help gets there. Or until you can get to the place of birth.