THANK YOU FOR REVIEWING THIS INFORMATION ON THE SAFE REDUCTION OF CESAREAN DELIVERY RATES. AT THE END OF THE SLIDE SET THERE WILL BE A BRIEF SURVEY TO DOCUMENT YOUR COMPLETION OF THIS ACTIVITY.

CONTENT FOR THIS SLIDE SET WAS TAKEN DIRECTLY FROM TWO ACOG PUBLICATIONS. FOR MORE DETAILED EXPLANATIONS OF THESE RECOMMENDATIONS, I ENCOURAGE YOU TO READ THIS MATERIAL.

- Obstetric Care Consesus: Safe prevention of primary cesarean delivery.
- ACOG Committee Opinion #766. Approaches to limit intervention during labor and delivery.

NTSV

- **N**ulliparous, **T**erm, **S**ingleton, **V**ertex
  - This is the benchmark for which we are compared regionally and nationally. It removes factors that are beyond our control like malpresentation, multiples, preterm referrals, high risk referrals, and other factors.
- The PQCNC statewide goal for NC is 20%
- NHRMC Cesarean Section Rates:
  - 2015- %
  - 2016- %
  - 2017- %
  - 2018- %
  - 2019- %
- We want to continue evidence based practices that will maintain our NTSV rate and not allow that number to drift upward.

WHAT ARE THE BEST PRACTICES TO SAFELY ENSURE A CONTINUED LOW NTSV RATE?

- Properly diagnose and manage labor arrest disorders
  - Latent/early labor
  - Active labor
  - Second stage
- Properly evaluate and respond to abnormal fetal heart rate tracings
- Use intermittent fetal monitoring and avoid early amniotomy if possible
- Utilize operative vaginal delivery when appropriate

PROPERLY DIAGNOSE AND MANAGE EARLY LABOR

- Latent labor is the period before a patient reaches 6cm of cervical dilation. The duration of early labor is highly variable and the old rules of 20 hours for nulliparas no longer apply.
- Researchers found a two-fold reduction in the rate of c-section when labor arrest was diagnosed after 8 hours of oxytocin augmentation versus 4 hours, without a change in neonatal outcomes.
- Patience is the key…slow or prolonged progressive latent labor should not be an indication for c-section.

PROPERLY DIAGNOSE AND MANAGE ACTIVE PHASE ARREST DISORDERS

- 6cm cervical dilation is the threshold for active labor.
- Cesarean Section for arrest of dilation in the active phase should be performed only when the following criteria are met:
  - Active labor with the cervix at least 6cm dilated AND membranes ruptures AND one of the following
    - 4 hours or more of adequate contractions
    - 6 hours or more of oxytocin administration with inadequate contractions and no cervical change

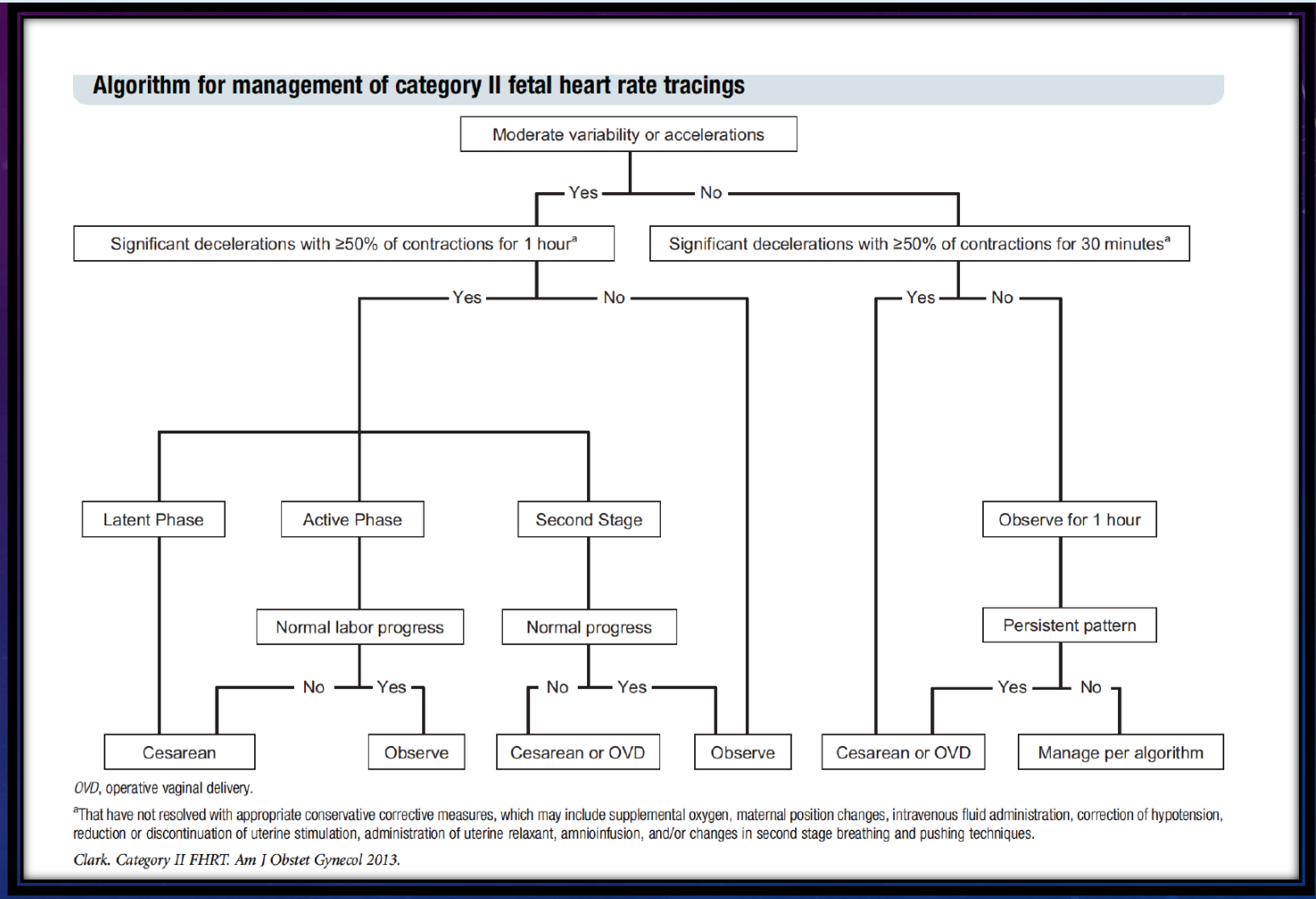
PROPERLY DIAGNOSE AND MANAGE ARREST OF SECOND STAGE OF LABOR

- Arrest of second stage should be diagnosed after 2 hours pushing in multiparous patients, and 3 hours in nulliparous patients.
- Longer durations may be appropriate on an individualized basis (eg, with the use of epidural analgesia or with fetal malposition) as long as progress is being documented.
- When arrest of second stage is diagnosed, C-section can be avoided with judicious use of operative vaginal delivery

PROPERLY EVALUATE AND MANAGE ABNORMAL FETAL HEART TRACINGS

- This topic is too expansive for the scope of this brief education set, but I have attached a sample algorithm from the CMQCC

Clark's Algorithm for Management of Cat II Tracings Available in Toolkit



USE INTERMITTENT FETAL MONITORING FOR LOW RISK PATIENTS

- Data from a Cochran metanalysis suggest that continuous EFM was associated with a 1.63 RR of having a c-section and a 1.15 RR of having an operative delivery when compared to intermittent monitoring.
- The study did note a 50% reduction in neonatal seizures with continuous EFM (.15% vs .29%), but no difference in neonatal death or in cerebral palsy at age 4.

FREQUENCY OF INTERMITTENT FETAL AUSCULTATION

- ACOG and AWHONN agree on frequency
  - Latent labor: q 1hour
  - Active labor: q 30 minutes
  - Second stage: q 15 minutes

- Listen Before:
  - Administration of narcotics
  - AROM
  - Transfer or discharge of patient

- Listen after :
  - Vaginal exam
  - SROM/AROM
  - Recognition of abnormal uterine activity
  - Recognition of abnormal vaginal bleeding

THANK YOU FOR COMPLETION OF THIS TASK PLEASE FOLLOW LINK FOR A SHORT QUIZ

- Survey link inserted