

Information about Induction of Labor

Most pregnancies last about 40 weeks. It is normal to give birth to your baby anytime between 37 and 42 weeks. **Your health care provider may recommend for you to have an induction of labor.**

Induction of labor is when you start labor with medicines and other treatments instead of waiting for labor to naturally start.

It is very important to talk with your health care provider about induction of labor. We are committed to you and your baby's safety.

When should I have an induction of labor?

- ✔ You have a medical problem like diabetes or high blood pressure which could get worse if you stay pregnant.
- ✔ Your baby has a medical problem like they are not growing well inside or there is not enough fluid around them. It is better for them to be born than you to stay pregnant.
- ✔ You are 1 or 2 weeks past your due date.

When I should **not** have an induction of labor:

- ✘ You are **less than 39 weeks** pregnant and you and your baby are healthy.
- ✘ You have a reason to give birth to your baby by C-section instead of vaginal birth. Some reasons might be:
 - You had any surgery on your uterus before. You had an up and down (vertical) cut from a cesarean section (c-section) in your uterus from a previous pregnancy.
 - You have herpes sores or blisters that broke on or near your vagina.
 - Your baby is not in a head facing down position or breeched. This means your baby's butt, legs, or shoulders are facing down.
 - Your placenta covers part or all of the opening of your cervix.

Active labor is when your cervix has opened to 6 cm.

Your contractions last about 45 seconds and happen every 3 minutes.

Contractions get stronger and more painful.

Active labor can last about 4 to 8 hours.



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General Information

- We **strongly** recommend an induction by 41 weeks. There are health problems that can happen to your baby after this time.
- We will do extra tests to check the fluid around the baby and their heart beat **if you choose not to be induced by 41 weeks.** We recommend induction if the results show it would be safer for your baby.
- Your baby may be less likely to have bad health results like lung problems from pooping in your uterus before they are born if you induce at 41 weeks.
- Your general risk of cesarean birth depends on many factors. You should talk to your health care provider about your specific health risks.
- Inductions can take longer than if you were to go into labor on your own. Sometimes it can take 1 to 3 days for induction to start labor.
- You will need an IV for fluids and medicines if you are induced.
- Your baby's heart rate and contractions in your uterus need to be watched carefully. You will get a belt to wear around your mid-section to record this information.
- An induction starts your labor. If your labor has already started, but is going slow, your health care provider may use one or more ways listed below to speed it up. This is called augmentation of labor.

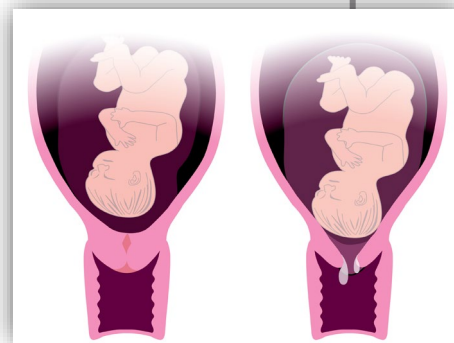


How will you start my induction of labor?

There are many ways to start your induction of labor. It will depend on how you want to be induced, your health care provider's recommendation, and if your cervix is ready for labor.

Sometimes your health care provider may use 2 or more ways to get your cervix soft and ready for labor and contractions.

We explain the most common ways to start labor on the next page.



Your cervix will open, thin out, and soften in the first part of the induction.

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Stripping or Sweeping Membranes

Your health care provider will use their finger to gently separate the bag of waters from the side of the uterus. This will release hormones to soften your cervix and make it easier to open. Stripping membranes does not break the bag of waters and doesn't always start your labor. You may feel cramping, contractions, and have light vaginal bleeding.

Nipple Stimulation

You release hormones when your nipples are gently pulled like when a baby is breastfeeding. The hormones will make your uterus contract. We will show you how to use nipple stimulation. You should **only do this with guidance from your health care provider**. You can gently pull your own nipples, have your partner touch your nipples, or use a breast pump.

Only stimulate one breast at a time. Nipple stimulation can shorten the number of days before you go into labor. This way only works for women whose cervix is already soft for labor.

Placing a Cervical Ripening Balloon (Cook Catheter or Foley bulb):

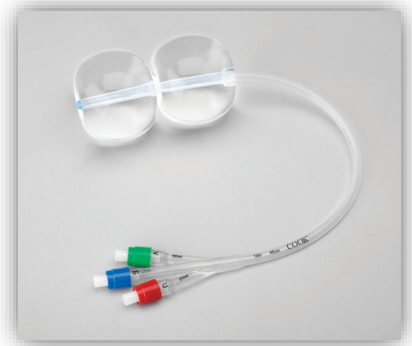
Your health care provider may put a small flexible tube (catheter) with a balloon into your cervix. The balloon is filled with sterile water. The balloon puts pressure on the inside to slowly open your cervix. The balloon will fall out once your cervix has opened enough (about 4 cm) or it will be removed after 12 hours. You may feel cramps and pressure in your pelvic area when the balloon is first put in.

Prostaglandin Medicine Pills

The misoprostol or "miso" pill starts changes in your cervix to soften it for labor. Sometimes the pill will start contractions and start your labor. Other times it makes your active labor shorter once it starts. Your health care provider may put a pill in your vagina under your cervix or you may take the pill by mouth. You may need take the pill a few times before your labor starts. **This option is not available if you had a C-section in the past.**

Oxytocin (Pitocin) Medicine:

Oxytocin is the same hormone in your body that makes the uterus contract. This medicine will make your contractions **stronger and closer together**. The contractions can be more painful. You will get this medicine through your IV fluid. The fluid will go directly into your vein. Oxytocin is given slowly and it may take many hours before you go into active labor.



Cervical Ripening Balloon
or Cook Catheter



You will get oxytocin
through your IV fluid.

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What are the risks?

- The most common risk from an induction of labor is having contractions that are too close together. Your health care provider will try to stop or slow down the contractions if they are too close or if your baby's heart rate slows down.
- Inducing labor too early may be dangerous for your baby's health because your baby may not be fully developed.
- We don't recommend for you to choose to have an induction of labor before 39 weeks of pregnancy. If there is a medical problem for you or your baby, your health care provider may consider induction earlier than 39 weeks.



How to Schedule Your Induction

You and your health care provider will decide the best date for your induction.

- Your health care provider will schedule the date with the hospital's Labor and Delivery Unit (L&D).
- Call L&D at **505-272-2603** at least 2 – 4 hours before your scheduled induction time. This is to make sure that your induction time and date have not changed.
- It is possible that your induction time or date may change because of:
 - A change in your medical needs.
 - The number of beds and staff available in L&D on that day.

We will make every effort to keep you and your baby safe if there are any changes in your induction date or time.

Questions? Call Us!

Call our OB Triage Logic Nurse Advice Line with urgent worries or if your clinic is closed: 1-877-925-6877

Call 24 hours and 7 days a week.

Call your clinic and speak to your health care provider for any other questions.

