

Oregon Health and Sciences University Water Birth Guidelines

Guidelines for Water Birth at OHSU Rationale

The Nurse-Midwifery service at OHSU offers women the choice of water immersion as a method for coping with the stress and pain of labor and birth. A review of the literature and our own practice experience indicates this is safe for both mother and infant if appropriate guidelines are followed.

Eligibility

Water immersion for labor and birth will be limited to CNM clients who request it, who have been screened and approved prenatally and who have signed the informed consent form. Requests made on admission cannot be honored. The number of clients registered for water birth will be limited as the Nurse-Midwifery practice designates.

Prior to labor the patient and partner (if applicable) will have:

1. Read the information pamphlet
2. Been counseled by a member of the OHSU CNM Practice
3. Signed the informed consent agreeing to conditions stated therein which includes agreeing to leave the tub at any time when requested to do so by the provider.

On presentation in labor the patient will be evaluated in the standard fashion for vital signs, urinary protein, fetal well-being and frequency of contractions. In addition, the CNM will assess patient's risk status, fetal position, and stage of labor.

Criteria for using the "Waterbirth Tub"

1. Singleton pregnancy
2. ³37 weeks gestation
3. Cephalic presentation
4. Absence of pregnancy complications (pre-eclampsia, uncontrolled GDM, hypertension, etc)
5. Absence of bleeding greater than bloody show
6. Normal fetal heart tones
7. Clear amniotic fluid - Women may labor in the tub if meconium is present and FHTs are reactive
8. Spontaneous or on-going labor after misoprostol or Pitocin

Contraindications:

1. Known untreated communicable blood or skin infection
2. Maternal fever or suspected infection
3. Active genital herpes
4. Abnormal fetal heart rate monitoring
5. Excessive vaginal bleeding
6. Known HIV, positive hepatitis B antigen, or hepatitis C antibody
7. Suspected macrosomia
8. Meconium stained amniotic fluid may labor, but not deliver in tub
9. Any condition that requires continuous electronic fetal heart rate monitoring