

Case Study #4 - Birth Notes

Due 4/27

Born 4/22

8 lbs. 1 oz. 20 in.

Appears 8 and 9

First birth, under the care of a full-midwifery practice at a hospital.
Desire to have a non-medicated, vaginal birth. (PMP5 -6)

- 6:46 am - Text from dad. It looks like things are starting to happen. She started having contractions late last night/early in the morning. They just got up and started timing them. He will give me a call in a little while.
- 7:32 am - Call from dad. Touch base about how things are going. They don't quite need me yet, but will keep me posted.
- 7:51 am - Text from dad saying to plan on coming over sometime between 9-10. She's having contractions lasting a little over a minute, 4-5 minutes apart now for over an hour.
- 9:00 am - I arrive at their house. She's doing great: moving around, drinking water, getting into a rhythm. She's been feeling cold and hot, and contractions feel more intense. She puts her playlist on. Leans over onto the wall and rocks during contractions. Tries some hands and knees and tailor sitting.
- 9:30 am - Throws up. Having some bloody show as well.
- 9:58 am - Eating scones
- 11:00 am - Go for a walk
- 11:15 am - Lays down on her side on the couch to see if she can rest and maybe nap between contractions.
- 11:30 am - Her water breaks with a gush.
- 12:30 pm - Feeling like it's time to go to the hospital. After her waters released, things got more intense.
- 12:49 pm - Arrive at the hospital. While they go up to triage, I park the cars.
- 1:00 pm - Gets checked to be 5 cms, 100% effaced, and -1 station. She's feeling a lot of intensity, and the nurse goes to start the tub in her room.
- 1:30 pm - Move to room 301. We quickly settle in, and she goes in the tub. She gets some relief from the water, but it's still quite intense. Feeling hot: use cold washcloths on forehead, while we take turns fanning her. She's sounding like she needs to push during contractions, so she gets checked to make sure she's not pushing on an un-dilated cervix.
- 2:35 pm - Checked (in the tub) to be 6 cms. There's more molding of the head, and a bit of swollen cervix in the front. We suggests trying a different position, that puts less pressure on her bottom, to see if the need to push lessens.
- 2:50 pm - Gets out of tub and into the bed; on her knees leaning over top of bed. This seems to help a bit, but she's still feeling the need to push. It's hard trying not to.

- 4:30 pm - Throws up. She's feeling very tired and we suggest trying a side-lying position, with the peanut ball/pillows between her legs. That seems to help a bit, and even though she still has to work to not push during contractions, she manages some rest in between contractions. She tends to throw up with almost every one of them.
- 5:40 pm - Gets checked to be 9.5 cms, 100% effaced, 0 station. Great progress, and the swelling is gone. Midwife suggests that she will try to hold the little bit of cervix that is left over the baby's head with the next contraction to see if it stays there, and then she can do whatever her body wants without having to fight the sensation. It works, and the midwife suggests mom push a couple of times on her back. Baby's heartbeat goes down, so she switches positions: try side lying, and then hands and knees. Baby and birthing person like that more. She's still throwing up, but feeling better. She continues trying different positions: lunge, squat, tug of war with rebozo, laboring on the toilet, on the birth stool. Sometime in between all this, shift change occurs and a new midwife comes on.
- 8ish pm - Birthing person is feeling quite tired, and so we ask what she thinks about doing "passive descent" for about an hour. That sounds good to her, and she lays on her side for it. Dad and I continue to take turns switching out her cold washcloths, putting pressure on her back, rubbing her legs. She switches between sides.
- 9:14 pm - Gets checked, baby's head is "right there" (+2/+3 station). She starts pushing again on hands and knees, and is doing really great. Soon after we start seeing a bit of baby's head, and someone suggests she can touch it if she wants, so she does. Not much later the head is crowning, and things get even more intense. We help her stay with her focus, do gentle pushes.
- 9:38 pm - Baby is born! As his body comes out, his eyes are already wide open. (Body comes out in transverse position.)

Welcome, welcome little guy. Say hi to daddy.

As she turns to try to lay on her side, there is a gush of blood from what seems to be the cord, and so the midwife immediately clamps it.

I know, that was hard. But we did it. We did it. And papa helped a lot. I'm so glad you're here.

Midwife inspects the tear, and calls docs to come in for the repair. Mom sings Twinkle Twinkle to get the baby to settle down.

11ish pm - Once the tear is repaired, baby shows signs of wanting to feed, so mom puts him at the breast. He gets on after a bit, and feeds.

11:30 pm - Midwife mentions the docs are recommending IV antibiotics for her, to avoid infection from the tear.