

1

## On Admission

**Does mother need referral?**

- No  
 Yes, organized

Check your facility's criteria

**Partograph started?**

- No, will start when  $\geq 4$ cm  
 Yes

Start plotting when cervix  $\geq 4$  cm, then cervix should dilate  $\geq 1$  cm/hr

- Every 30 min: plot HR, contractions, fetal HR
- Every 2 hrs: plot temperature
- Every 4 hrs: plot BP

**Does mother need to start:***Antibiotics?*

- No  
 Yes, given

Ask for allergies before administration of any medication  
 Give antibiotics to mother if any of:

- Mother's temperature  $\geq 38^\circ\text{C}$
- History of foul-smelling vaginal discharge
- Rupture of membranes  $> 18$  hrs

*Magnesium sulfate and antihypertensive treatment?*

- No  
 Yes, magnesium sulfate given  
 Yes, antihypertensive medication given

Give magnesium sulfate to mother if any of:

- Diastolic BP  $\geq 110$  mmHg and 3+ proteinuria
- Diastolic BP  $\geq 90$  mmHg, 2+ proteinuria, and any: severe headache, visual disturbance, epigastric pain

Give antihypertensive medication to mother if systolic BP  $> 160$  mmHg

- Goal: keep BP  $< 150/100$  mmHg

- Confirm supplies are available to clean hands and wear gloves for each vaginal exam.**

- Encourage birth companion to be present at birth.**

- Confirm that mother or companion will call for help during labour if needed.**

Call for help if any of:

- Bleeding
- Severe abdominal pain
- Severe headache or visual disturbance
- Unable to urinate
- Urge to push

## 2

## Just Before Pushing (Or Before Caesarean)

**Does mother need to start:***Antibiotics?*

- No  
 Yes, given

*Magnesium sulfate and antihypertensive treatment?*

- No  
 Yes, magnesium sulfate given  
 Yes, antihypertensive medication given

Ask for allergies before administration of any medication

Give antibiotics to mother if any of:

- Mother's temperature  $\geq 38^{\circ}\text{C}$
- History of foul-smelling vaginal discharge
- Rupture of membranes  $> 18$  hrs
- Caesarean section

Give magnesium sulfate to mother if any of:

- Diastolic BP  $\geq 110$  mmHg and 3+ proteinuria
- Diastolic BP  $\geq 90$  mmHg, 2+ proteinuria, and any: severe headache, visual disturbance, epigastric pain

Give antihypertensive medication to mother if systolic BP  $> 160$  mmHg

- Goal: keep BP  $< 150/100$  mmHg

**Confirm essential supplies are at bedside and prepare for delivery:***For mother*

- Gloves  
 Alcohol-based handrub or soap and clean water  
 Oxytocin 10 units in syringe

*For baby*

- Clean towel  
 Sterile blade to cut cord  
 Suction device  
 Bag-and-mask

Prepare to care for mother immediately after birth:

Confirm single baby only (not multiple birth)

1. Give oxytocin within 1 minute after birth
2. Deliver placenta 1-3 minutes after birth
3. Massage uterus after placenta is delivered
4. Confirm uterus is contracted

Prepare to care for baby immediately after birth:

1. Dry baby, keep warm
2. If not breathing, stimulate and clear airway
3. If still not breathing:
  - clamp and cut cord
  - clean airway if necessary
  - ventilate with bag-and-mask
  - shout for help

- Assistant identified and ready to help at birth if needed.**

## 3

## Soon After Birth (Within 1 Hour)

**Is mother bleeding abnormally?**

- No
- Yes, shout for help

If bleeding abnormally:

- Massage uterus
- Consider more uterotonic
- Start IV and keep mother warm
- Treat cause: uterine atony, retained placenta/fragments, vaginal tear, uterine rupture

**Does mother need to start:**

*Antibiotics?*

- No
- Yes, given

Ask for allergies before administration of any medication

Give antibiotics to mother if placenta manually removed or if mother's temperature  $\geq 38$  °C and any of:

- Chills
- Foul-smelling vaginal discharge

If the mother has a third or fourth degree of perineal tear give antibiotics to prevent infection

*Magnesium sulfate and antihypertensive treatment?*

- No
- Yes, magnesium sulfate given
- Yes, antihypertensive medication given

Give magnesium sulfate to mother if any of:

- Diastolic BP  $\geq 110$  mmHg and 3+ proteinuria
- Diastolic BP  $\geq 90$  mmHg, 2+ proteinuria, and any: severe headache, visual disturbance, epigastric pain

Give antihypertensive medication to mother if systolic BP  $> 160$  mmHg

- Goal: keep BP  $< 150/100$  mmHg

**Does baby need:**

*Referral?*

- No
- Yes, given

Check your facility's criteria.

*Antibiotics?*

- No
- Yes, given

Give baby antibiotics if antibiotics given to mother for treatment of maternal infection during childbirth or if baby has any of:

- Respiratory rate  $> 60$ /min or  $< 30$ /min
- Chest in-drawing, grunting, or convulsions
- Poor movement on stimulation
- Baby's temperature  $< 35$  °C (and not rising after warming) or baby's temperature  $\geq 38$  °C

*Special care and monitoring?*

- No
- Yes, organized

Arrange special care/monitoring for baby if any:

- More than 1 month early
- Birth weight  $< 2500$  grams
- Needs antibiotics
- Required resuscitation

**Started breastfeeding and skin-to-skin contact (if mother and baby are well).**

**Confirm mother / companion will call for help if danger signs present.**

## 4

## Before Discharge

**Confirm stay at facility for 24 hours after delivery.**

**Does mother need to start antibiotics?**

- No  
 Yes, given and delay discharge

Ask for allergies before administration of any medication  
 Give antibiotics to mother if any of:

- Mother's temperature  $\geq 38^{\circ}\text{C}$
- Foul-smelling vaginal discharge

**Is mother's blood pressure normal?**

- No, treat and delay discharge  
 Yes

Give magnesium sulfate to mother if any of:

- Diastolic BP  $\geq 110$  mmHg and 3+ proteinuria
- Diastolic BP  $\geq 90$  mmHg, 2+ proteinuria, and any: severe headache, visual disturbance, epigastric pain

Give antihypertensive medication to mother if systolic BP  $> 160$  mmHg

- Goal: keep BP  $< 150/100$  mmHg

**Is mother bleeding abnormally?**

- No  
 Yes, treat and delay discharge

If pulse  $> 110$  beats per minute and blood pressure  $< 90$  mmHg

- Start IV and keep mother warm
- Treat cause (hypovolemic shock)

**Does baby need to start antibiotics?**

- No  
 Yes, give antibiotics, delay discharge, give special care

Give antibiotics to baby if any of:

- Respiratory rate  $> 60/\text{min}$  or  $< 30/\text{min}$
- Chest in-drawing, grunting, or convulsions
- Poor movement on stimulation
- Baby's temperature  $< 35^{\circ}\text{C}$  (and not rising after warming) or baby's temperature  $\geq 38^{\circ}\text{C}$
- Stopped breastfeeding well
- Umbilicus redness extending to skin or draining pus

**Is baby feeding well?**

- No, establish good breastfeeding practices and delay discharge  
 Yes

**Discuss and offer family planning options to mother.**

**Arrange follow-up and confirm mother / companion will seek help if danger signs appear after discharge.**

**Danger Signs**

**Mother has any of:**

- Bleeding
- Severe abdominal pain
- Severe headache or visual disturbance
- Breathing difficulty
- Fever or chills
- Difficulty emptying bladder
- Epigastric pain

**Baby has any of:**

- Fast/difficult breathing
- Fever
- Unusually cold
- Stops feeding well
- Less activity than normal
- Whole body becomes yellow