

What will happen at home after Cervical Ripening?

- Some women will go into labour and have to come to BU that day or night after phoning BU to speak to staff
- Some women will not be in labour but will have other pain or will have bleeding, broken waters, reduced movement from the baby or other concerns and will have to come in to BU after phoning to speak to staff.
- Some women will have the Foley balloon fall out and will then need to phone BU to discuss what to do next - some will be asked to come in immediately to start the induction if staff are available, while others will be advised to come in at 5.30 am as planned.
- Many women will sleep all night without any of these and come into BU as planned at 5.30 am after phoning at 5am. If you phone, **please tell the midwife** you have had Cervical Ripening.

What should I do at home?

- All your usual activities including eating, drinking and showering.
- Stay close to a telephone.
- Make sure your family and friends know you may need to come to the BU overnight.

What things should make me ring BU before 5am and prepare to come into hospital?

- If your baby's movements are less than usual, ring immediately, don't wait until morning (generally your baby's movements will be normal).
- Ring also if you have:
 - contractions or any other abdominal pain;
 - broken waters;
 - bleeding vaginally, more than a few spots;
 - green vaginal discharge;
 - a balloon catheter and it falls out; and/or
 - any other concerns or feel unwell in any way

Safety

Foley balloon catheters and Prostin Gel have been used for cervical ripening for decades all around the world and are considered safe for you and your baby. If you have any concerns you can discuss this with your doctor or midwife.

A free and confidential interpreter service is available 24 hours, 7 days a week. If required, please ask staff to arrange an interpreter for you. AUSLAN is also available.

Carers provide care and unpaid assistance to others. They may be family members, friends or neighbours. Please notify staff if you have a carer.

All health facilities and grounds are 100% smoke free.

Parking is available on the hospital campus for a fee.

Free Health Information Line Healthdirect Australia

1800882436

www.healthdirect.org.au/pbb

Westmead is a teaching hospital.

We are training the next generation of midwives and doctors. You may be asked to allow our students to participate in your care.

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Induction of Labour

Westmead Hospital Women's and Newborn Health



Information for women undergoing Induction of Labour

CONTACTS:

Day Assessment Unit (02) 9845 6150

Birth Unit (02) 9845 6663 or (02) 9845 7395

What is Induction of Labour?

Labour usually starts naturally between 37 and 42 weeks of pregnancy when regular strong contractions in your uterus (womb) open the cervix (neck of the womb) so that the baby can pass down the vagina and be born. Sometimes this doesn't happen or there is a reason why it is necessary to bring labour on before it starts naturally.

This is called Induction of Labour.

Induction of labour usually involves a medication (oxytocin) combined with breaking of the waters in front of the baby's head (artificial rupture of membranes or ARM). This takes place in the Birth Unit (BU).

If your cervix is very 'favourable' and ready for birth, ARM/oxytocin is all that is needed to get labour started. In many cases however, the cervix is 'less favourable' and treatment is required the day before the induction to soften and open the cervix. This increases the success of the induction and reduces the length of labour.

This is called Cervical Ripening.

The usual way of ripening the cervix is to insert a small soft Foley catheter balloon into your cervix (Fig.1). This causes the release of a natural hormone called prostaglandin. An alternative is to insert a synthetic prostaglandin called Prostin Gel into your vagina (Fig.2). Your team will decide which is preferable for you and your baby.

Staff to Complete for Patient:

Is cervical ripening needed? Yes / No
If cervical ripening is needed, it will occur on

(day/date)_____ at (time)_____

in the **Day Assessment Unit (DAU)** off the Women's Health Clinic.

Phone (02) 9845 6150 or (02) 9845 8501.

- ✓ Eat and drink as per normal
- ✓ **Please don't be late**

Staff to Complete for Patient:

Whether or not cervical ripening is needed, your induction (ARM/oxytocin) will take place in the **Birth Unit (BU)** on:

(day/date)_____ at **5:30am**.

You must ring the BU on (02) 9845 6663 or (02) 9845 7395 at **5:00am** to see if they are ready for you to come in.

Occasionally, the BU is very busy and you will be asked to ring back but if possible, we like to start inductions early for the safety of you and your baby, so **please don't be late**.

Cervical Ripening

Fig.1 Balloon catheter ripening

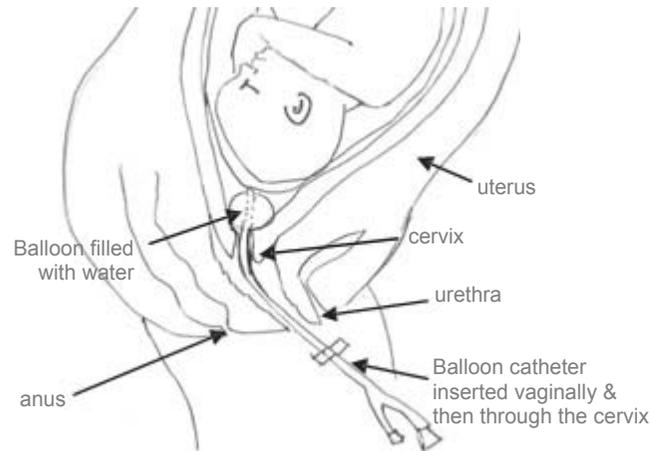
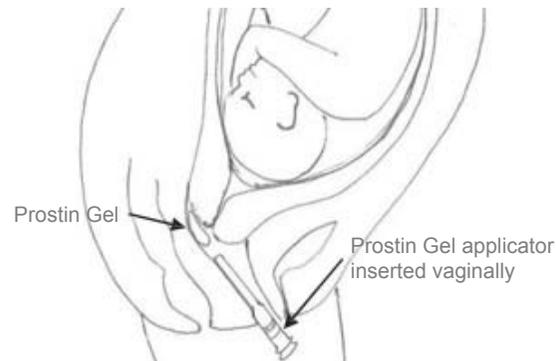


Fig.2 Prostin Gel ripening



Cervical Ripening – checking the baby

Before and after insertion of the balloon catheter or Prostin Gel, we will check your baby's heartbeat with a cardiotocograph (CTG) to make sure everything is ok.

Going home after Cervical Ripening

Following your cervical ripening, if you have come from home, you will generally go back home. The usual plan then is for you to phone the BU the next morning **at 5am** to arrange to come in for your induction at 5:30am, although sometimes you will need to phone and come in earlier (see over the page).

You can go home as long as:

- your baby's heart tracing on the CTG monitor is normal;
- you are not having more than two uterine tightenings every 10 minutes on the CTG – you will be asked to stay for further monitoring if you are;
- you are not having any abdominal pains (note that the Foley catheter will often cause mild period-like pain which will usually settle within an hour);
- your waters are not broken, however there is a small chance that your waters may break as the balloon catheter is inserted – the balloon can still be used, but you will need to remain in hospital;
- you are not bleeding (a few spots of blood after an internal examination is normal);
- your baby does not have excessive water around it (AFI > 25) – this is rare;
- your baby does not have very low water around it (AFI ≤ 5) or abnormal placental blood flow results – this is rare;
- if you have twins, breech presentation, previous caesarean or previous rapid labour (≤ 3 hours first labour / ≤ 1 hour other labours), you can go home if you have had a Foley catheter for ripening – if you have had Prostin Gel, you will need to stay in hospital;
- you don't have a health problem that needs hospital admission – this is uncommon in women who have come from home for ripening – women on insulin for diabetes do not generally need admission, but should phone the Birth Unit if they go into labour before the time of the planned induction.