
Forsyth County EMS

Skill Procedure: Childbirth

	MR / EMT	
	Expanded Scope EMT	
	EMT-I	
	EMT-P	

I. Clinical Indications:

- A. Imminent delivery with crowning

II. Procedure:

- A. Delivery should be controlled so as to allow a slow controlled delivery of the infant as to prevent injury to the mother and infant.
- B. Support the infant's head as needed.
- C. Check the umbilical cord surrounding the neck. If it is present, slip it over the head. If unable to free the cord from the neck, double clamp the cord and cut between the clamps.
- D. Suction the mouth then nose with a bulb syringe.
- E. Grasping the head with hands over the ears, gently pull down to allow delivery of the anterior shoulder.
- F. Gently pull up on the head to allow delivery of the posterior shoulder.
- G. Slowly deliver the remainder of the infant.
- H. Clamp the cord approx. 2 inches from the abdomen with 2 clamps and cut the cord between the clamps.
- I. Record APGAR scores at 1 and 5 minutes.
- J. Follow the **Newly Born Protocol** for further treatment.
- K. The placenta will deliver spontaneously, usually within 5 minutes of the infant. Do not force the placenta to deliver.
- L. Massaging the uterus may facilitate delivery of the placenta and decrease bleeding by facilitating uterine contractions.
- M. Continue rapid transport to the hospital.

III. Certification Requirements:

Maintain knowledge of the indications, contraindications, technique, and possible complications of the procedure. Assessment of this knowledge may be accomplished via quality assurance mechanisms, classroom demonstrations, skills stations, or other mechanisms as deemed appropriate by the local EMS System. Assessment should include direct observation at least once per certification cycle.

Approved by:
Dr. R.L. Alson
Medical Director
May, 2006