

The BirthPlace at Castle Rock Hospital

Your Personal Guide to Labor and Delivery



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Pregnancy

Discomforts with Pregnancy

Shortness of Breath: Because of the enlarged uterus, the lungs don't have as much room to expand.

- Lying on your side instead of your back can be helpful
- Prop yourself up with pillows at night to sleep
- Slow down when walking, climbing stairs, etc.

Congestion: Blood volume increases by as much as 45%. This causes swelling of the mucous membranes in the nose.

- Increase fluids
- Cold steam humidifier

Frequent Urination: The uterus is very large and places a lot of pressure on the bladder.

- Kegel exercises can help to strengthen the muscles around the urethra, vagina and anus

Loose and Aching Joints: The hormone relaxin is released toward the end of pregnancy, softening the cartilage of the pubic bone and pelvis.

- A prenatal massage can be helpful

Leg Cramps: A calcium or magnesium supplement may be helpful. Check with your doctor for guidance.

Backache: Pregnancy affects your posture and how you walk. The "pregnancy waddle" is caused by compensating for the extra weight.

Breast Changes: Breasts enlarge during pregnancy and become tender. The areola and nipples become larger and darker. This is due to hormones that affect the pigmentation of the skin.

Round Ligament Pain: There are ligaments that run on both sides of the uterus and one that runs along the floor of the pelvis. As the uterus becomes larger these ligaments stretch. Any sudden movement can cause these spasms.

- A belly support band can be helpful

Heartburn: The stomach doesn't have the ability to hold as much food causing acid from the stomach to rise into the esophagus, causing a burning sensation.

- Eating smaller meals every few hours may help
- Do not eat right before going to bed
- Sleeping propped up if heartburn is severe may be helpful

Swelling: Circulation is slowed during pregnancy. Swelling of the legs, feet and hands is normal toward the end of a pregnancy.

- Elevate legs when possible
- Try to move around throughout the day
- Lie on your side for sleeping
- Check-in with your OB provider
- Epsom salt baths can be helpful



Labor

Contractions

Your uterus contracts periodically throughout pregnancy. These contractions are usually painless and irregular. The closer you get to the time of delivery they may become more frequent and uncomfortable.

How do You Know You Are in Labor?

If your contractions are evenly spaced and begin to occur closer together, and walking, taking a shower or moving around does not provide relief, you may be in labor.

Timing Contractions

The frequency is measured from the beginning of one contraction to the beginning of the next, and the duration is measured from the beginning of one to the end of the same one. For example, 9:00 to 9:01 is the duration or how long the contraction lasts. While 9:00 to 9:05 is the distance between them, or the frequency.

True Labor or False Labor?

True Labor: Contractions are regular, increase in intensity and get closer together. There is discomfort in the back/lower abdomen, the discomfort does not stop with walking, showering or moving around. This is when the cervix is beginning to dilate.

False Labor: Contractions are irregular, intensity is unchanged and frequency of contractions is unchanged. Any discomfort is relieved by walking, showering or moving around.

When Should You Go to the Hospital?

Your doctor or midwife will talk to you about when they want you to go to the hospital. Labor varies from woman to woman. You may be instructed differently from another woman depending on how your pregnancy has been and what your cervical exams have been in your provider's office. If you think you might be in labor or you are feeling differently, it would be best to check in with your OB provider.

WARNING SIGNS

Call your OB provider if you are concerned with any of the following:

- **Preterm Labor:** Before 37 weeks, four or more uncomfortable contractions in an hour
- **Cramping:** Sporadic or constant
- **Lower Backache:** Sporadic or constant pelvic pressure, a sudden increase in vaginal discharge — more mucous-like, watery, blood-tinged
- **Vaginal Bleeding:** Bright red vaginal bleeding is not normal
- **Abdominal Pain:** Needs immediate attention from your doctor
- **Decreased Fetal Movement:** Fetal kick counts = 10 to 12 per hour
- **Fever:** Call health care provider if it is over 100.4 degrees
- **Severe Headache:** Seeing spots, numbness, weakness, difficulty speaking
- **Urination Issues:** Painful urination, blood-tinged urine, frequent urination with small amounts



Delivery

Relaxation Techniques

Music: Creating a relaxing environment with a music style of your choice can help you stay relaxed.

Massage: Touch therapy can be useful. Your labor support person can massage your shoulders, back, feet and hands to help you stay relaxed during labor. It will be helpful if your labor support person knows how much pressure you like.

Water Therapy: Getting in a warm shower or bath can help you to relax. This will only be able to be done if you don't have an epidural and have no complications going on with your labor.

Aroma Therapy: Using aromatherapy for relaxation during labor and birth can be helpful for some women. Here at AdventHealth Castle Rock, we support and encourage the use of aromatherapy during your birthing experience.

Breathing Techniques

Slow-Focused Breathing: Deep breath in letting it out slowly.

Patterned Paced Breathing: AH Hee, AH Hee, AH Hee, AH Hoo. Breathe at a comfortable pace. This helps you focus on your breathing pattern and not the pain of the contraction.

Dilation

The cervix opens gradually during labor. It is measured in centimeters from 0 to 10. This is measured with a vaginal exam by the nurse. The average time for complete dilation, 10 cm, is 18 hours.

Effacement

Prostaglandin hormones soften and ripen the cervix to prepare for the birthing process. The cervix is 3 to 4 inches long and becomes thinner as it is stretched over the head of the baby. An effacement of 100% is needed for the delivery of the baby. This is measured with a vaginal exam.

Station

This is the relationship of the top of the baby's head to the ischial spines of the pelvis. If the baby's head is above the ischial spines, it is at a negative station. At the level of the ischial spines is a zero station and below the ischial spines is a positive station. This is measured with a vaginal exam. These stations tell us how your labor is progressing.

Artificial Rupture of Membranes

Your water will need to break at some point. This will happen spontaneously, or your health care provider will need to break it for you. Your health care provider will insert a long crochet-like hook called an amni hook into your vagina and break the bag of water.

Pain Medications

Analgesics — Narcotics: Given via IV in the active phase of labor. It helps you to relax but does not take away the pain completely.

Nitrous Oxide: Used for labor pain, it is a mixture of 50% nitrous gas and 50% oxygen that is inhaled through a mask. It is used widely in dental offices; most people know it as “laughing gas.” You hold your mask and inhale the gas mixture for about 30 seconds before a contraction begins. Starting to inhale before a contraction begins helps the gas to reach its peak effect at about the same time as the contraction reaches its peak, providing the greatest relief. The nitrous is self-administered by the laboring woman, breathing it in as you feel the need. Once you decide you want to use it, your provider will order it and a member of the anesthesia team will come to your room, set it up and review how to use it. Some women have reported nausea after prolonged use; medication to help ease the nausea is available if that happens. It can also cause some unsteadiness when up, which is why there should always be a family member or staff person in the room when you want to get out of the chair or bed in case you need assistance. You may be out of bed and use the nitrous. As long as you are steady on your feet, you may be up and about in your room. You cannot use nitrous oxide while sitting in the tub. There are no known effects on the baby; nitrous is the only pain relief method used for labor that is cleared from the body through the lungs, so as soon as you pull the mask away, the nitrous effect is gone within a breath or two.

*** Only a handful of hospitals in the country offer this option for pain relief.*

Epidural: Anesthetic is injected into the lower back through a catheter. The catheter makes it possible to easily re-administer or continually administer the anesthetic without multiple needle insertions. Patients start feeling relief in about 15 to 30 minutes.

What to Pack

Here are a few items to consider when packing your hospital bag:



Your own pillow



Extra socks



Cell phone
and charger



Slippers and robe



Clothes to go home



Toiletries



Lip balm



Supportive bra



Hand fan



Cards, books
(time passers)



Handheld massager

Episiotomy

This is a surgical incision that is made on the space between the vagina and the anus, called the perineum. This allows more room for the baby's head to be delivered if the tissue will not stretch.

If you have an epidural on board, you will not need any further anesthetic. If not, a local injection will be placed in the perineum to numb the area.

Delivery

As the baby comes down through the pelvis and the head starts to be seen, the scalp will look wrinkled. This is normal and due to the perineal and vaginal muscles putting pressure on the top of the head. The head appears and the perineum will stretch. This is called crowning. Your health care provider will guide the head out as you push. When the head is delivered, the mouth and nose will be suctioned. With the next push, the shoulders are delivered, and the rest of the baby slips out. The cord will be clamped and cut. Make sure to let your provider know if you want to delay the clamping of the cord. It may take a few seconds for your baby to take his/her first breath and begin to cry.

Vaginal Discharge: Pads will need to be worn for two to six weeks.

Warning Signs: Bleeding more than a heavy period, passage of clots and foul odor. Call your health care provider.





At AdventHealth Castle Rock, we want the birth of your baby to be special and unique



To schedule your personalized birth concierge appointment or tour, please scan the QR Code.

This appointment will give new parents delivering at AdventHealth Castle Rock the opportunity to tour our beautiful labor and delivery unit, complete pre-registration forms, share your preferences for a personalized birth experience and get questions answered about what to expect when you come to the hospital for the birth of your baby.

Labor and Delivery
AdventHealth Castle Rock
2350 Meadows Blvd. | Castle Rock, CO 80109

Pushing

Your nurse will be with you the entire time you are pushing and during the actual delivery of your baby.

Your nurse will make sure you are in the correct position for pushing and using the right technique. She will continue to monitor the baby to ensure that it is tolerating the pushing stage. She will call your health care provider at the appropriate time for them to arrive for the delivery.

Delivery with Forceps

Forceps are used when the baby is “stuck” and needs assistance. The instrument is placed in the vagina and cradles the baby’s head. With the next contraction, you will push, and your health care provider will gently guide the baby through the vagina.

Delivery with Vacuum Extraction

A suction cup is placed on the top of the baby’s head. With the next contraction, you will push, and your health care provider will suction the baby down the birth canal. Often, there is a bruise on the top of the baby’s head, and your baby’s head may have a cone-shaped appearance. The bruise will fade and your baby’s head will round out in the next few days.

Cesarean Birth

Babies born by a Cesarean Section (C-Section) are delivered through an incision made on the mother’s abdominal wall and the uterus.

Reasons a C-Section may need to be performed:

Cephalopelvic Disproportion: Baby’s head is too large to fit through the mother’s pelvis

Fetal Distress: Baby is no longer tolerating the labor environment

Your Health is Put at Risk: High blood pressure, etc.

Ineffective Contractions/Progress of Labor: Failure to progress

Prolonged Rupture of Membranes: Risk of infection

*** Delivery of the baby will take about 10 to 15 minutes, shorter if it is an emergency.*

*** Delivery of the placenta and the repair of the incision can take 45 to 60 minutes. The top layer of skin is usually closed with staples or stitches.*

At AdventHealth Castle Rock, we encourage skin-to-skin contact as soon as possible. As long as baby and mom are stable, baby will be placed skin-to-skin in the operating room while they finish the surgery.

Recovery after C-Section: Normal hospital stay is 48 to 72 hours

Gas Pains

The sooner you get up and start moving around, the better you will feel.



To learn more, scan the QR Code or visit

adventhealth.com/hospital/adventhealth-castle-rock/our-services/mother-and-baby-care

Notes

Our Health Equity Promise

Patient Protection and Affordable Care Act: Section 1557

AdventHealth complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability or sex. This facility does not exclude people or treat them differently because of race, color, national origin, age, disability or sex.

AdventHealth provides free aid and services to people with disabilities to communicate effectively with us, such as:

- Qualified sign language interpreters
- Written information in other formats (large print, audio, accessible electronic formats, other formats)

AdventHealth provides free language services to people whose primary language is not English, such as:

- Qualified interpreters
- Information written in other languages

If you need these services, please call 844-893-2783.

If you believe that this facility has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability or sex, you can file a grievance or request that someone assist you with filing a grievance at:

Littleton

Phone: 303-778-5685 | lah.patientrep@adventhealth.com

Porter

Phone: 303-778-5685 | pah.patinetrep@adventhealth.com

Avista

Phone: 303-661-4357 | aah.patientrep@adventhealth.com

Castle Rock

Phone: 720-455-2531 | crk.patientrelations@adventhealth.com

Parker

Phone: 303-269-4053 | pkr.patientrelations@adventhealth.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically, through the Office for Civil Rights Complaint Portal, available at ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. Department of Health and Human Services

200 Independence Avenue, SW

Room 509F, HHH Building Washington, D.C. 20201

1-800-368-1019, 800-537-7697 (TDD)

Complaint forms are available at hhs.gov/ocr/office/file/index.html.

The statements below direct people whose primary language is not English to translation assistance.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al número siguiente.

CHÚ Ý: Nếu bạn nói Tiếng Việt, có các dịch vụ hỗ trợ ngôn ngữ miễn phí dành cho bạn. Gọi theo số điện thoại dưới đây.

注意：如果您使用中文，您可以免费获得语言协助服务。请拨打下面电话号码。

Atansyon: Si ou pale kreyòl Ayisyen, gen sèvis asistans nan lang ou ki disponib gratis pou ou. Rele nimewo ki anba an.

주의: 한국어를 사용하시는 경우, 언어 지원 서비스를 무료로 이용하실 수 있습니다. 아래의 번호로 전화하십시오.

UWAGA: Jeżeli mówisz po polsku, możesz skorzystać z bezpłatnej pomocy językowej. Zadzwoń pod numer podany poniżej.

ملحوظة: إذا كنت لا تتحدث اللغة الانجليزية فإن خدمات الترجمة متوفرة لك مجاناً. الرجاء الإتصال بالرقم أدناه.

ATTENTION: Si vous parlez français, des services d'aide linguistique vous sont proposés gratuitement. Appelez le numéro ci-dessous.

PAUNAWA: Kung nagsasalita ka ng Tagalog, maaari kang gumamit ng mga serbisyo ng tulong sa wika nang walang bayad. Tawagan ang numero sa ibaba.

ВНИМАНИЕ! Если вы говорите на русском языке, то вам доступны бесплатные услуги перевода. Для этого позвоните по нижеуказанному номеру.

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlos sprachliche Hilfsdienstleistungen zur Verfügung. Rufen Sie die untere Nummer an.

સુચના: જો તમે ગુજરાતી બોલતા હો, તો નિ:શુલ્ક ભાષા સહાય સેવાઓ તમારા માટે ઉપલબ્ધ છે. નીચેના નંબર પર ફોન કરો.

ATENÇÃO: Se você fala português, disponibilizamos serviços lingüísticos gratuitos. Ligue para o número abaixo.

ध्यान दें: यदि आप हिंदी बोलते हैं तो आपके लिए मुफ्त में भाषा सहायता सेवाएं उपलब्ध हैं। नीचे लिखे नम्बर पर सम्पर्क करें।

اگر شما فارسی زبان هستید، خدمات کمکی زبان بطور مجانی در دسترس شما قرار دارد. تو شماره زیر زنگ بزنید.

توجہ فرمائیے۔ اگر آپ اردو بولتے/بولتی ہیں تو آپ کے لئے لسانی خدمات مفت میسر ہیں۔ ذیل میں دیئے گئے نمبر پر کال کریں۔

注意：日本語でお話になりたい場合には、無料の通訳サービスをご利用いただけます。下記の番号にお電話してください。

ໄປດຊາບ: ຖ້າວ່າ ທ່ານເວົ້າພາສາ ລາວ, ການບໍລິການຊ່ວຍເຫຼືອ ດ້ານພາສາ, ໄດ້ອະໄພສິດ, ແມ່ນມີພ້ອມໃຫ້ທ່ານ. ກະລຸນາໃຫ້ພະຍາຍາມຕິດຕໍ່ສູງສູງ.

LUS CEEB TOOM: Yog tias koj hais lus Hmoob, cov kev pab txog lus, muaj kev pab dawb rau koj. Hu tus xojtooj hauv qab no.

ATTENZIONE: Se parlate italiano, sono disponibili dei servizi di assistenza linguistica gratuiti. Chiamare il numero sotto indicato.

 844-893-2783




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