

SAFE CHILDBIRTH CHECKLIST



Check 1

On Admission

Instructions:

- Put the tick in appropriate box.
- Follow the information given on right side for reference.

Mother's Temperature _____	Fetal Heart Rate _____
Mother's Blood Pressure _____	

Does Mother need referral?

- No
- Yes, organized

Refer to FRU if any of following danger signs are present and state reason on transfer note:

- Vaginal bleeding
- High fever
- Severe headache or blurred vision
- Convulsions
- Severe abdominal pain
- History of heart disease or other major illnesses
- Difficulty in breathing

Partograph started?

- No, will start at ≥ 4 cm
- Yes

Start when cervix ≥ 4 cm,

- Every 30 min: plot contractions, FHS, and maternal pulse
- Every 4 hours: plot temperature, blood pressure, and cervical dilation in cm (cervix dilates ≥ 1 cm/hr)

Does Mother need:

Antibiotics?

- No
- Yes, given

Give antibiotics to Mother if:

- Mother's temperature $>38^{\circ}\text{C}$ ($>100.4^{\circ}\text{F}$)
- Foul-smelling vaginal discharge
- Rupture of membranes >12 hrs without labor or >18 hrs with labor
- Labor >24 hrs or obstructed labor
- Rupture of membranes <37 wks gestation

Magnesium sulfate?

- No
- Yes, given

Give first dose and then refer immediately to FRU if Mother has:

- If diastolic BP is ≥ 110 mm Hg and 3+ proteinuria
- Convulsions

What is HIV Status of Mother?

- Positive
- Negative
- Status unknown, HIV test advised

If mother is HIV positive :

- Give Nevirapine
- If not available, refer the patient immediately after birth

Are soap, water and gloves available?

- No
- Yes, I will wash hands and wear gloves for each vaginal exam

Presence of Birth Companion at birth encouraged.

Confirmed that Mother or Companion will call for help during labor if needed

Call for help if any of:

- Bleeding
- Severe abdominal pain
- Difficulty in breathing
- Severe headache or blurred vision
- Urge to push
- Cannot empty bladder frequently

Patient Name

Registration No.



Completed by Date

Check 2

Just Before Pushing (or Before Caesarean)

Mother's Temperature _____
Mother's Blood Pressure _____

Fetal Heart Rate _____

Does Mother need:

Antibiotics?

- No
- Yes, given

Give antibiotics to Mother if any of:

- Mother's temperature $>38^{\circ}\text{C}$ ($>100.4^{\circ}\text{F}$)
- Foul-smelling vaginal discharge
- Rupture of membranes >18 hrs with labor
- Labor >24 hrs or obstructed labor now
- Cesarean section

Magnesium sulfate?

- No
- Yes, given

Give first dose and then refer immediately to FRU if Mother has:

- If diastolic BP is ≥ 110 mm Hg and 3+ proteinuria
- Convulsions

Confirm essential supplies are at bedside:

For Mother

- Gloves
- Soap and clean water
- Oxytocin 10 units in syringe
- Pads for Mother

Prepare to care for Mother immediately after birth

1. Confirm single baby only (not multiple birth)
2. Give oxytocin IM within 1 minute
3. Massage uterus after placenta is delivered
4. Confirm uterus is contracted

For Baby

- Clean towel
- Sterile scissors / blade to cut cord
- Cord ligature
- Mucus extractor
- Bag-and-mask

Prepare to care for Baby immediately after birth

1. Keep the baby dry and warm, give IM Vit. K
2. If not breathing: stimulate and clear airway
3. If still not breathing:
 - a. Clamp and cut the cord
 - b. Ventilate with bag-and-mask
 - c. Shout for help (Pediatrician/LMO/CCSP trained service provider)

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

Check 3

Soon After Birth (within 1 hour)

Mother's Temperature _____

Baby's Temperature _____

Mother's Blood Pressure _____

Baby's Respiratory Rate _____

Baby's Weight _____

Is Mother bleeding abnormally?

- No
 Yes, shout for help

If bleeding >500 ml, or 1 pad soaked in <5 min:

- Massage uterus
- Start I/V fluids
- Treat cause
- If placenta delivered or completely retained: give IM or I/V Oxytocin, stabilize, and refer to FRU
- If placenta is incomplete: remove if any visible pieces, and refer immediately to FRU

Does Mother need:

Antibiotics?

- No
 Yes, given

Give antibiotics to Mother if manual removal of placenta performed, or if Mother's temperature >38°C (>100.4°F) and any of:

- Chills
- Foul-smelling vaginal discharge

Magnesium Sulfate?

- No
 Yes, given

Give first dose and then refer immediately to FRU if Mother has:

- If diastolic BP is ≥ 110 mm Hg and 3+ proteinuria
- Convulsions

Does Baby need:

Antibiotics?

- No
 Yes, given

Give Baby antibiotics if antibiotics were given to Mother, or if Baby has any of:

- Breathing too fast (>60/min) or too slow (<30/min)
- Chest in-drawing, grunting, or convulsions
- Looks sick (lethargic or irritable)
- Too cold (Baby's temp <35°C and not rising after warming) or too hot (Baby's temp >38°C)

Referral?

- No
 Yes, organized

Refer Baby to FRU if:

- Any of the above (antibiotics indications)
- Baby looks yellow, pale or bluish

Special care and monitoring?

- No
 Yes, organized

Arrange special care / monitoring for Baby if any of:

- Preterm
- Birth weight <2500 gms
- Needs antibiotics
- Required resuscitation

Nevirapine?

- No
 Yes, given

If Mother is HIV+, follow local guidelines for baby (prophylaxis to be started within 12 hours after birth)

Started breastfeeding and skin-to-skin contact (if Mother and Baby are well). Importance of colostrum feeding explained.

Danger signs explained and confirmed that Mother/Companion will call for help if danger signs appear. (Refer to "Danger Signs" given under Check 4).



Completed by Date

Check 4

Before Discharge

Mother's Temperature _____

Baby's Temperature _____

Mother's Blood Pressure _____

Baby's Respiratory Rate _____

Is Mother's bleeding controlled?

- No: Treat, observe and refer to FRU if needed
- Yes

Does Mother need antibiotics?

- No
- Yes: Give antibiotics and delay discharge

Give antibiotics to Mother if her temperature $>38^{\circ}\text{C}$ or $>100.4^{\circ}\text{F}$ and any of:

- Chills
- Foul-smelling vaginal discharge

Does Baby need antibiotics?

- No
- Yes: Give antibiotics, delay discharge, and refer to FRU

Give Baby antibiotics if Baby has any of:

- Breathing too fast ($>60/\text{min}$) or too slow ($<30/\text{min}$)
- Chest in-drawing, grunting, or convulsions
- No movement on stimulation
- Too cold (Baby's temp $<35^{\circ}\text{C}$ and not rising after warming) or too hot (Baby's temp $>38^{\circ}\text{C}$)
- Stopped breastfeeding well
- Umbilicus redness extending to skin or pus discharge

Is Baby feeding well?

- No: Help in baby feeding, delay discharge and refer to FRU if needed
- Yes, teach Mother exclusive breastfeeding

Home transport and follow-up for Mother and Baby arranged.

Confirmed that BCG and Polio first dose given to Baby.

Family planning options discussed and offered to Mother:

- LAM
- IUCD
- Female Sterilization
- OCP
- Condoms
- Male Sterilization

Danger signs explained and confirmed that Mother/Companion will seek help, if danger signs appear after discharge.

Danger Signs

Mother has any of:

- Bleeding
- Severe abdominal pain
- Severe headache or blurred vision
- Breathing difficulty
- Fever or chills
- Difficulty in emptying bladder

Baby has any of:

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