



Welcome to  
Childbirth Preparation I: For New  
Parents  
at Stormont-Vail Health  
Laura Odom, RN, IBCLC



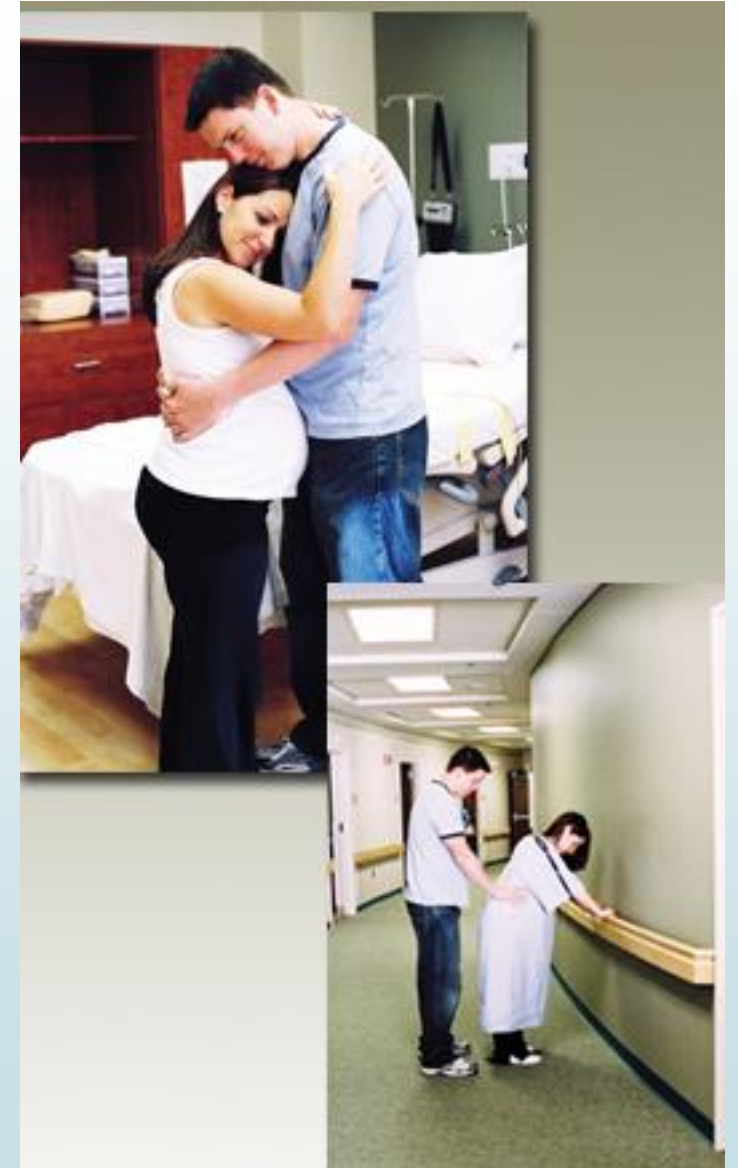
# Benefits of Childbirth Education

- Pregnancy and birth are normal occurrences.
- Learn to trust the process of labor, not fight it.
- Understanding the importance of labor support person/people.
- Learn your options:
  - Remote monitoring of baby so you can move around
  - Labor tubs, birthing balls, large labor rooms
  - Pain medications

# Role of the support person

Your support person can provide the following:

- Emotional support
  - Remind her of her strength, her capabilities, and your love for her.
- Timing of contractions
- Techniques learned in class
  - Breathe with her; provide massage/touch; keep her calm between contractions.





- Understanding comfort measures
  - Use pillows to help support and comfort her. Assist her in changing positions frequently. Keep her lips moist and remind her to empty her bladder.
- Assessment of her relaxation needs
  - Suggest new measures of relaxation or breathing if you find her having difficulty.
- Update family and friends
  - Everyone is so excited! Their presence may be overwhelming to a laboring mother. Update them via text messages/waiting room. You're in control of who visits and when! 😊
- Keep your strength up!!
  - Labor may be a long process. Most laboring moms won't eat during labor. Support people should maintain their strength and energy in order to be helpful. Just don't eat in front of mom! 😊

# COMMUNICATION



So often there are many issues that both the mother and support person are thinking of and many fears they are keeping from one another.





# Knowledge is Power

Together you will learn what to expect, how to handle it, and how to support each other through the process.

Ask questions! This is your birthing experience and you should be involved in your care.

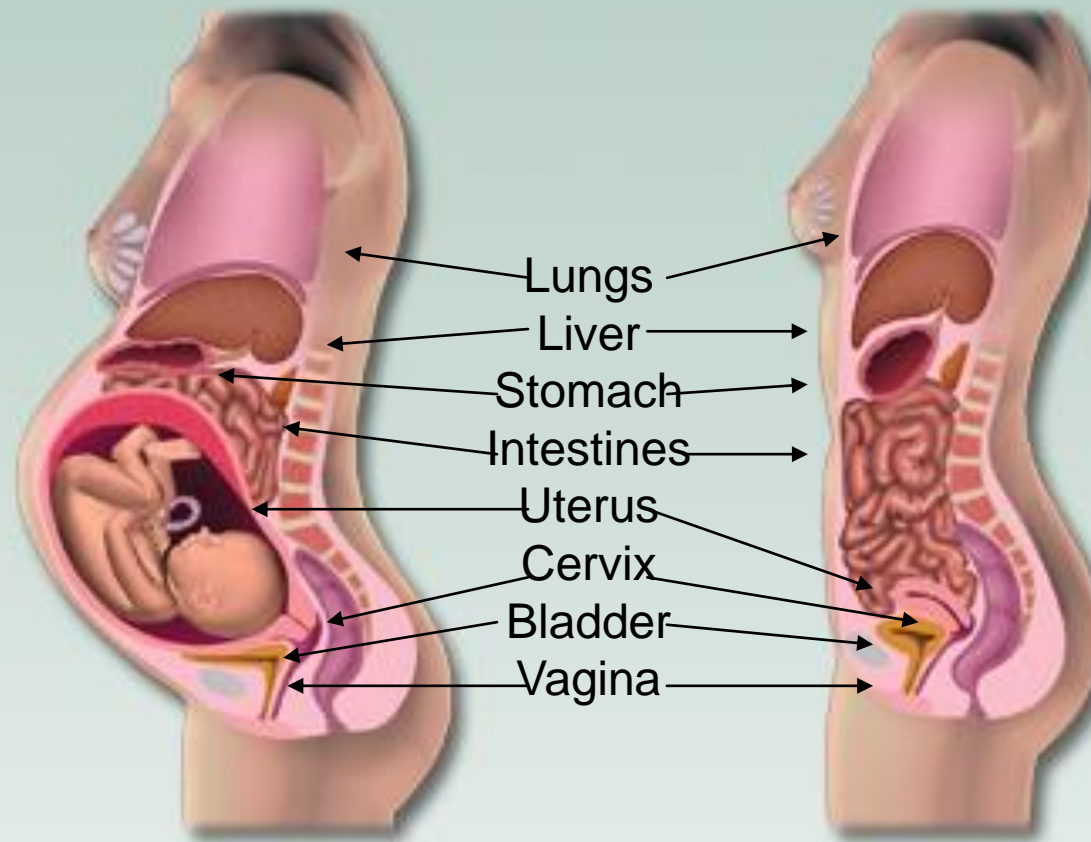
Practice your breathing and relaxation techniques.

# Discomforts of Pregnancy



Pregnancy

Pre-Pregnancy





- ## Shortness of Breath

  - Usually related to pressure of growing fetus. Gets better when baby “drops” into pelvis.
- ## Backache

  - Try a massage from your partner to relieve discomfort!
- ## Nasal Congestion

  - Related to swelling of mucus membranes. Try a humidifier and extra pillows when sleeping to prevent snoring.
- ## Swelling

  - Drink lots of water, put your feet up, eat some watermelon, massage the fluid back toward the heart, not to the tips of toes.

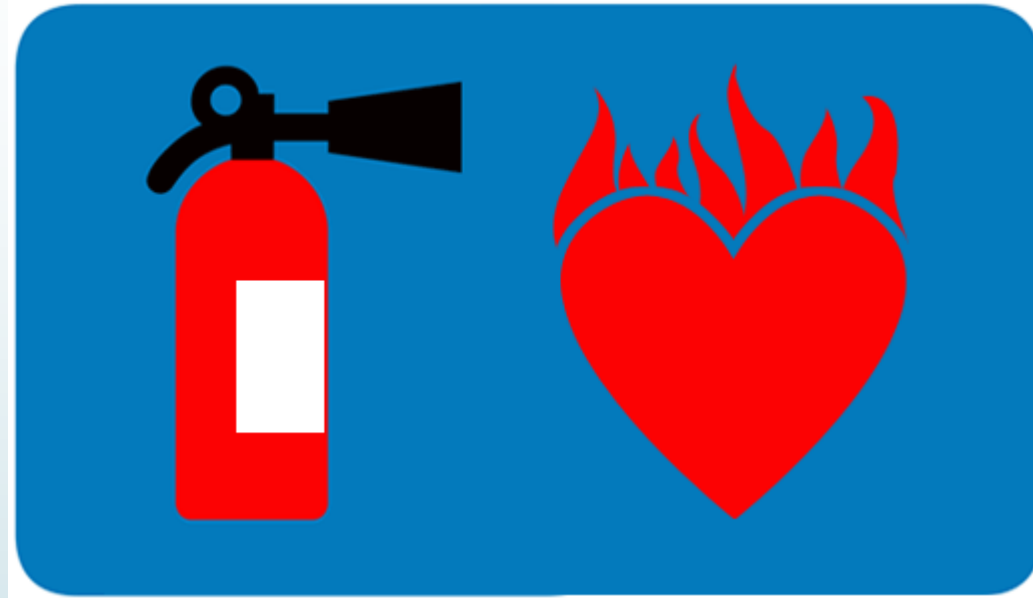


## Loose and aching joints



Softening of the cartilage allows the pelvis to expand 1 to 1 ½ cm.  
Try going for light walks to strengthen muscles and ligaments.

# Heartburn

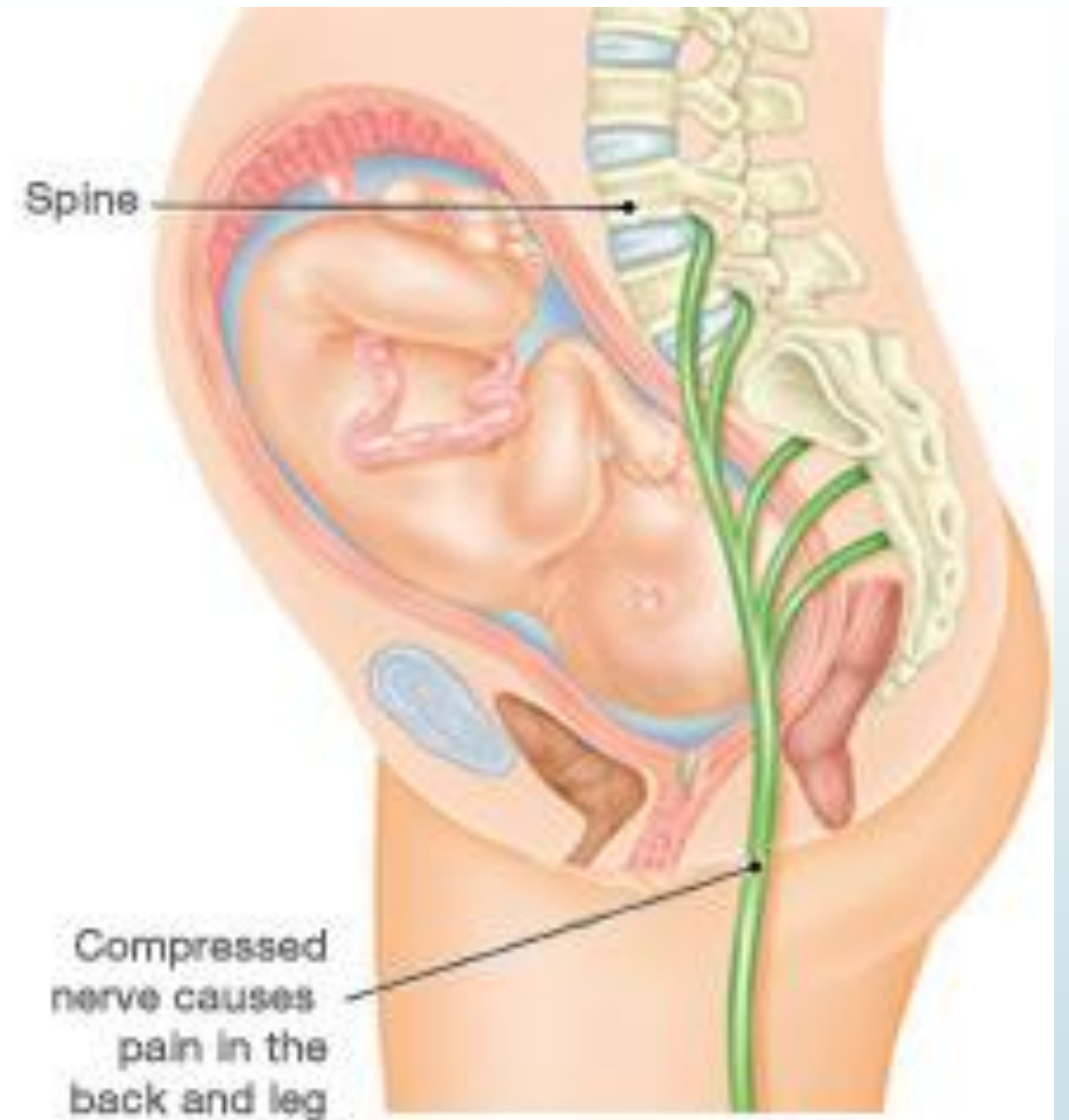


- Eat smaller, more frequent meals. Avoid greasy/fatty foods. Drink fluids after eating, not during.
- There is a pressure point between the breasts that can be rubbed in a clockwise motion to relieve heartburn.
- Talk to your provider about medications if needed.

# Sciatica

The sciatic nerve branches from the lower back down the buttocks and legs to the feet.

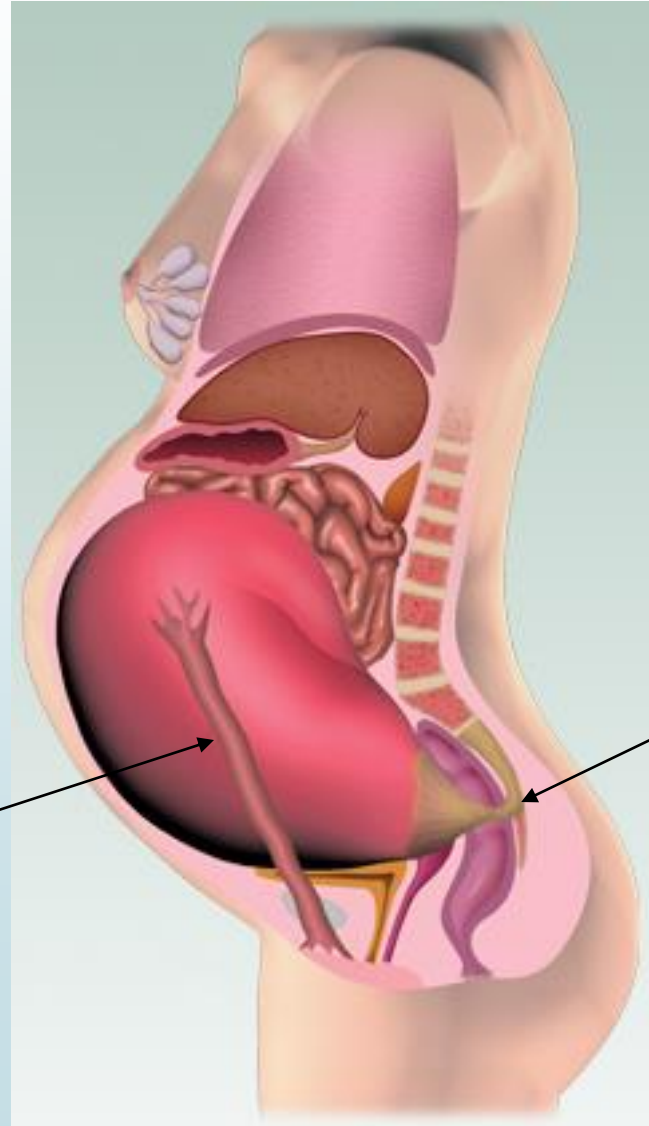
Try sitting on a birthing ball, getting a massage, or seeing a chiropractor.



# Round Ligament Pain

More common with second or more babies. A cramp in the side that gets better when stretching or drinking fluids. Increase fluid intake and magnesium in diet to prevent cramps in ligaments and muscles.

Round Ligament



Ligament



## Skin changes

- Dark line on belly is normal. Goes away after delivery.
- Itchiness is normal as skin stretches and grows. Try lotion and staying well hydrated!

## Breast changes

- Areola gets larger and darker during pregnancy so baby can find it for feedings. This will go back to what is "normal" for you after delivery/breastfeeding.

## Hemorrhoids and Constipation

- Possible need for stool softeners, creams, cooling pads. Talk to provider.

## Fatigue and Insomnia

- Sleep when you can!



Linea Nigra

# Emotional Changes



It's normal to experience a range of emotions during your pregnancy. Hormonal shifts often cause women to be tearful and/or moody at times. Don't hesitate to talk to your provider about ways to manage this if you are struggling.

# Braxton Hicks Contractions



- Often referred to as “False Labor”
- Mild tightening of abdomen
- May feel like a “balling-up” sensation
- Irregular in frequency
- No cervical change



# True Labor Contractions

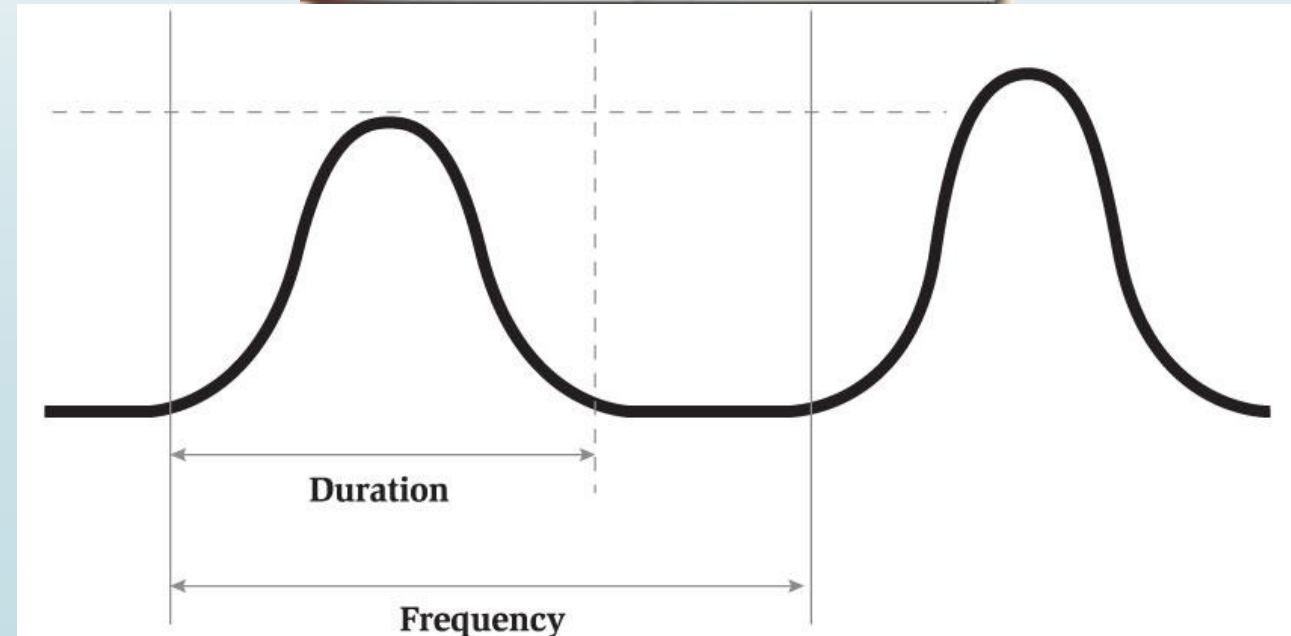
- Contractions occur at regular intervals
- Intensity increases
- Interval between contractions shortens
- Discomfort in back and or lower abdomen
- Discomfort does not stop with walking/position changes
- Dilates cervix

# False Labor Contractions

- Contractions occur at irregular intervals
- Intensity is relatively unchanged
- Interval between contractions does not shorten
- Discomfort primarily in lower abdomen
- Discomfort frequently relieved with walking/position changes
- Will not dilate cervix

# Timing Contractions

- Frequency: From the start of one contraction to the start of the next one.
- Duration: From the start of one contraction to the end of the same contraction.
- Take notes:
  - Stopped to breathe through it
  - Emesis (vomit)
  - Bloody show







# Anatomy & Physiology

Umbilical Cord

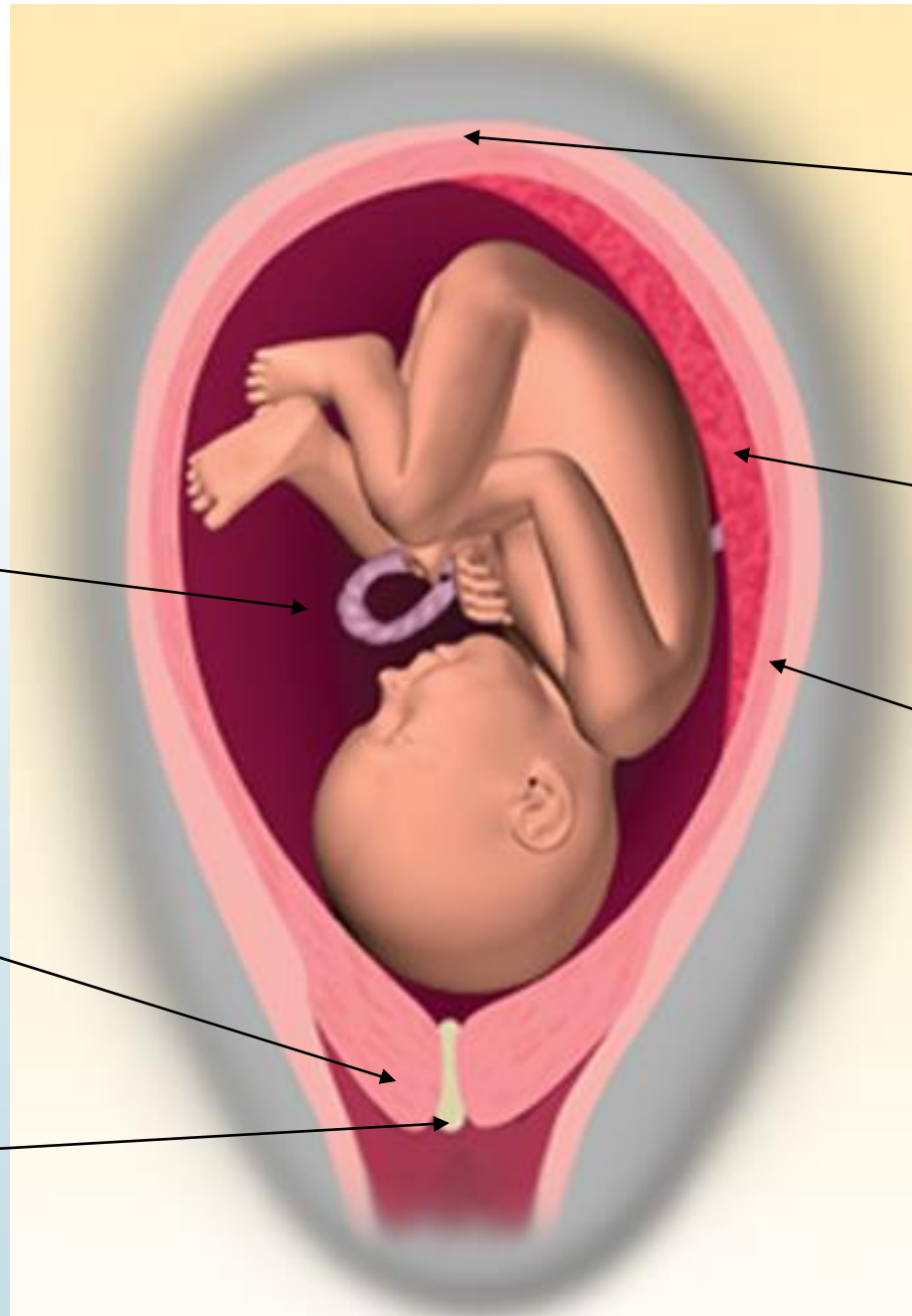
Fundus

Placenta

Uterus

Cervix

Mucus Plug



# Effacement

No changes to the cervix

Cervix is half its normal thickness

Cervix is completely thinned

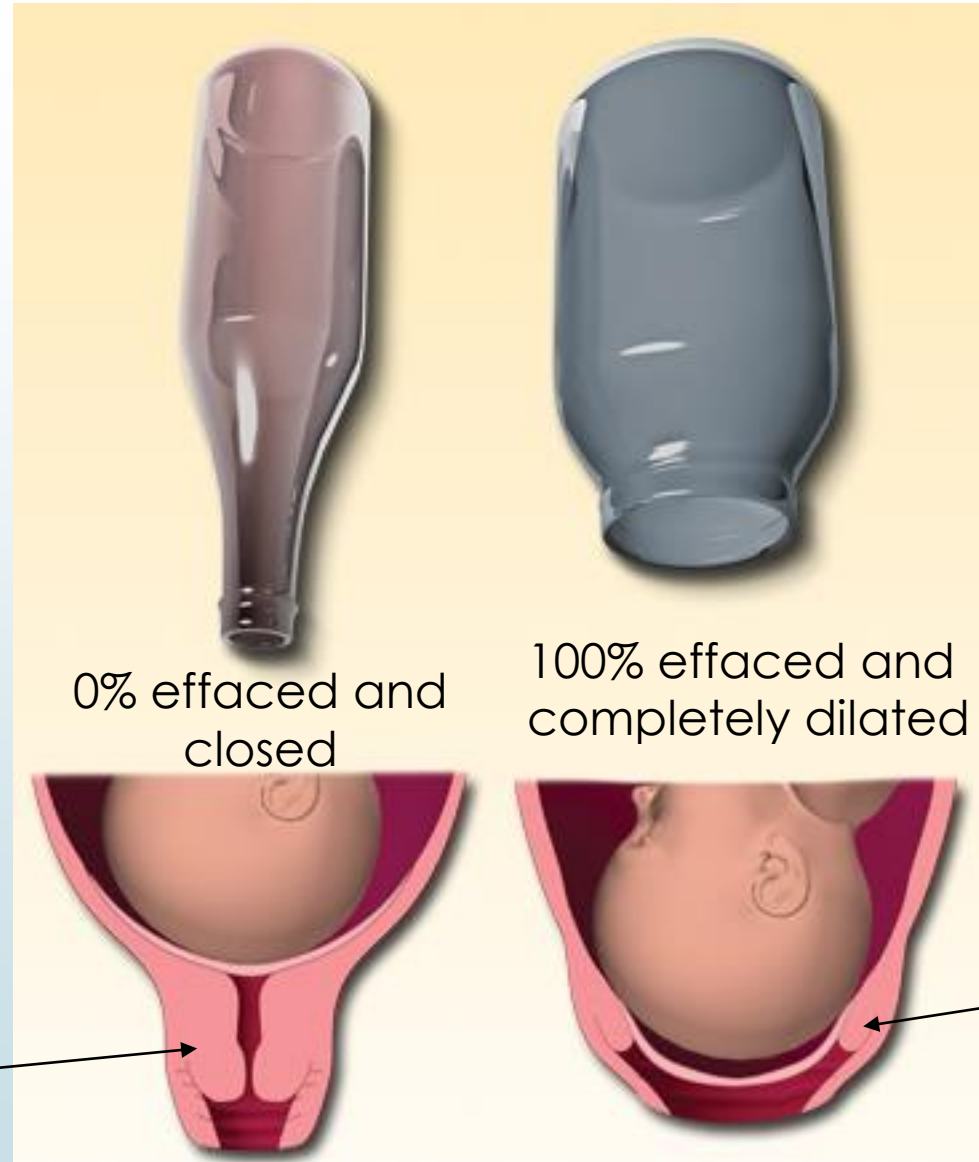


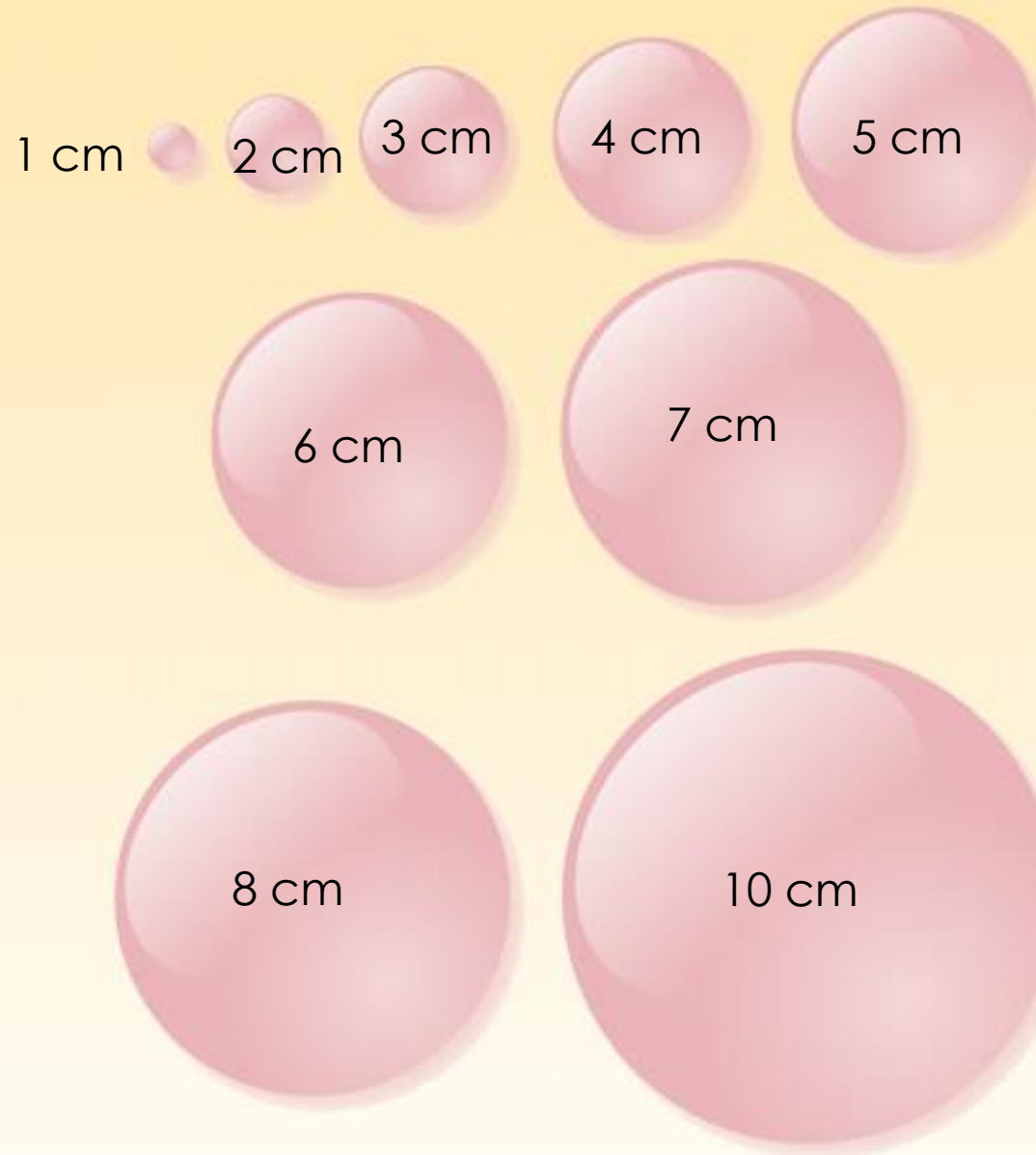
0%  
effaced

50%  
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100%  
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# Dilation

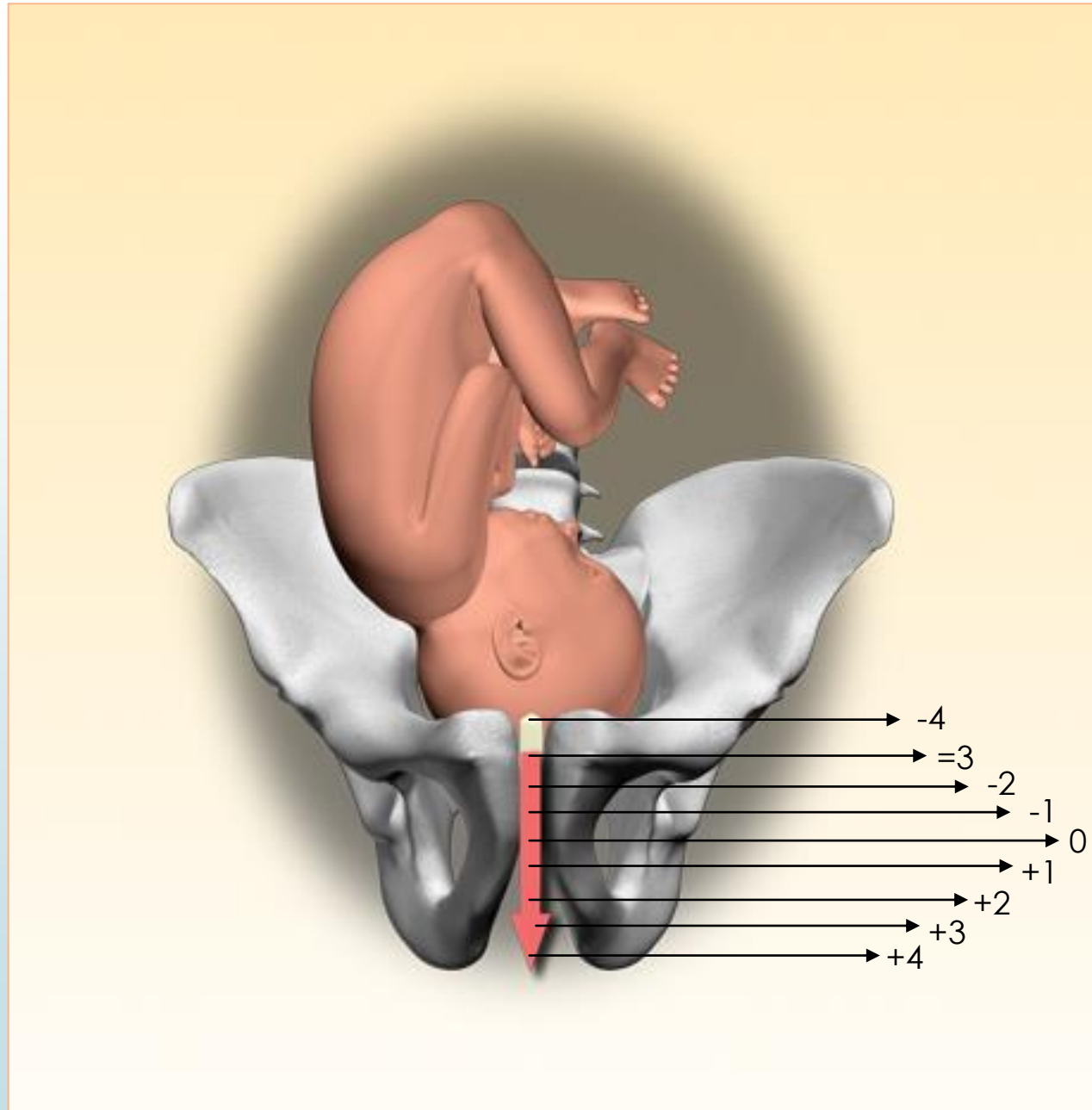




During a vaginal exam your nurse or provider are checking for dilation, effacement, and station of baby. This helps to determine what stage of labor you are experiencing.



# Station



# Amniotic Fluid

- Acts as a cushion for the growing fetus
- Keeps the environment stable
- Keeps bacteria from entering
- When your water breaks, note the following:
  - Color
  - Odor
  - Amount
  - Time



## When to go to the hospital



Contractions –  
every 5 min,  
lasting 1 minute,  
for 1 hour  
Remember: 5-1-1

Water breaks –  
don't shower or  
bathe, that  
increases risk of  
infection for you  
and baby; Just  
Come In!

Can't walk or talk  
through a  
contraction

Trust your body  
and trust your  
instincts!!

# Warning Signs of Preterm Labor

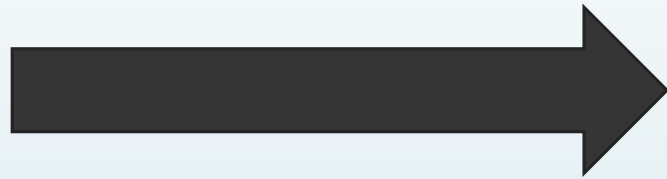


Preterm Labor =  
<37 weeks gestation

- Contractions – more than 4 in one hour
- Menstrual-like cramps
- Abdominal cramps
- Change in vaginal discharge
- Low backache
- Pelvic pressure – feels like your baby is pushing down
- Water breaks



# Decreased Fetal Movement



Absence of moving or significant lessening of movement may be concerning.

Notify your healthcare provider.

<https://www.countthekicks.org/>



## Additional Concerns...



### ➤ FEVER

- Potential sign of infection. Notify your provider.

### ➤ HEADACHE

- Usually severe
- Visual disturbances
- Other neurological symptoms (numbness, loss of balance or speech difficulties)

### ➤ URINARY DISCOMFORT

- Frequent and urgent trips to restroom
- Painful urination
- Blood-tinged



# The Stages of Labor



Stage One  
Early Labor  
Active Labor  
Transition

Stage Two  
Pushing  
Delivery of the baby

Stage Three  
Delivery of the placenta



How long is an average first labor?

16-18 hours





## Factors that affect labor...

- Size and Position of the baby's head
- Presentation of the baby
- Size and Shape of the mother's pelvis
- Mother's emotional and physical state
- Effectiveness of the contractions in dilating the cervix
- The Birth Partner and the support they provide
- Medications or anesthesia administered



# Prelude to Labor

1-7 days before true labor begins

- Nesting
- Braxton Hicks
- Loss of mucous plug
- Increased vaginal discharge
- May lose a pound or two

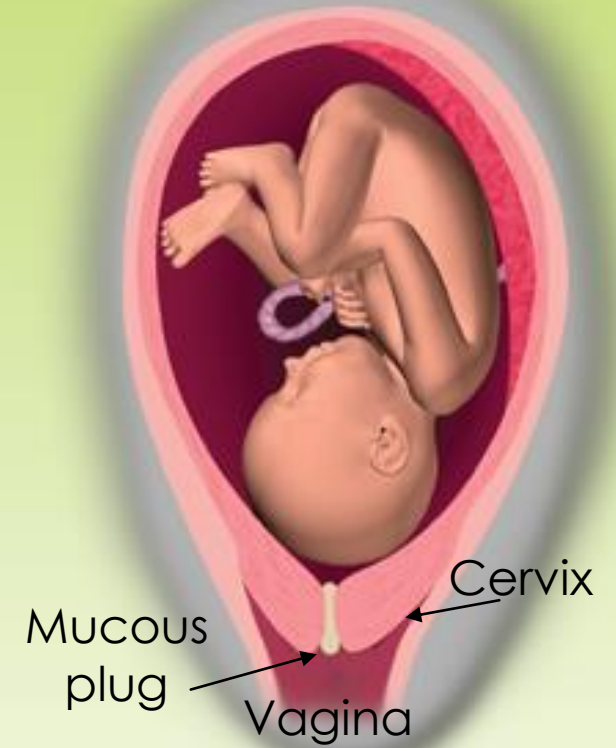
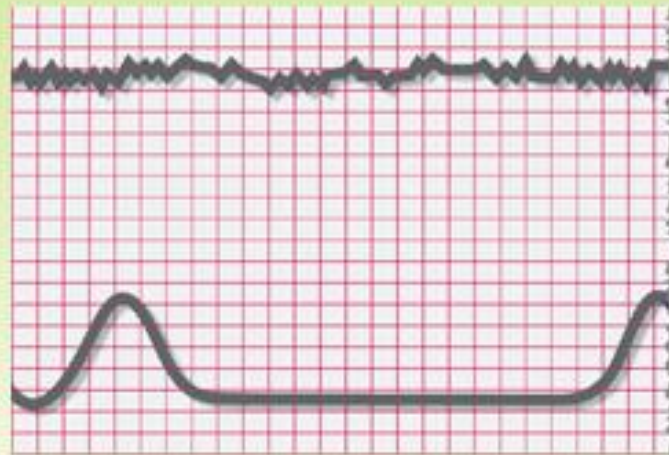


# Early Labor



Cervix closed to 3 cm

Contractions 5-15 minutes apart  
Lasting about 25 to 45 seconds



# Excitement, eagerness, nervousness...



- Try to rest
- Conserve your energy
- Time contractions
- Eat a light snack and drink some water

Notify your provider of regular, frequent contractions.

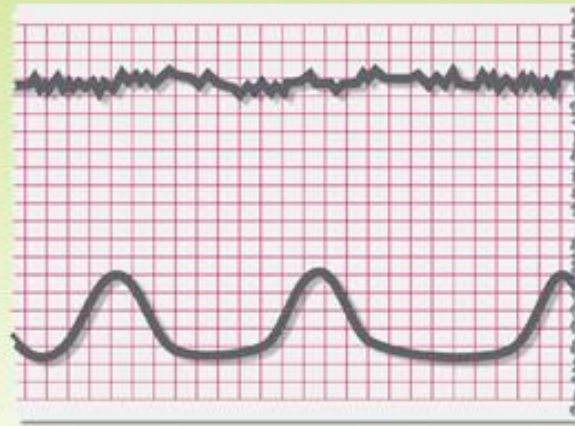


# Active Labor

Cervix dilates  
from 4 cm to 8  
cm



Contractions 3-5 minutes  
apart and last 40-60 seconds  
each



Bag of waters

Cervix

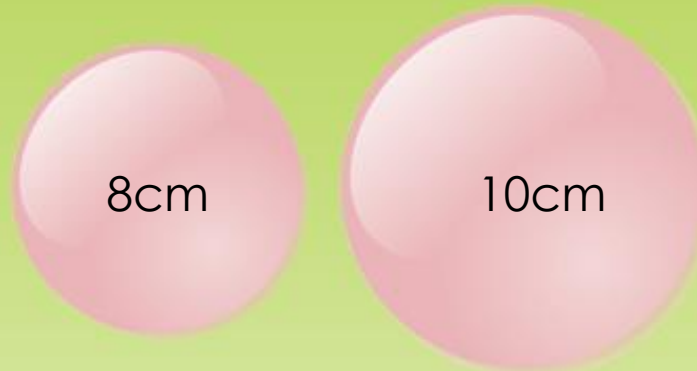
The cervix is thinned out and opening up. The baby's head is facing mother's side. In this position the widest part of the baby's head is in the widest part of the mother's pelvis

# Moms become more involved in the work of labor

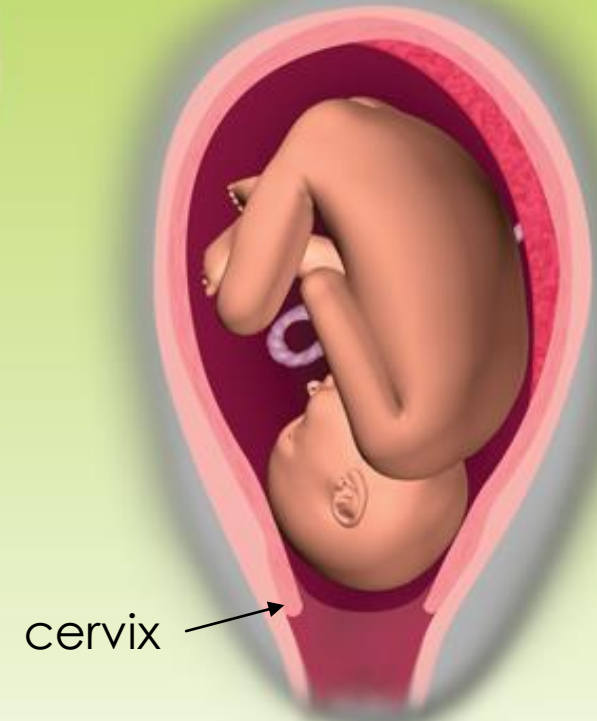
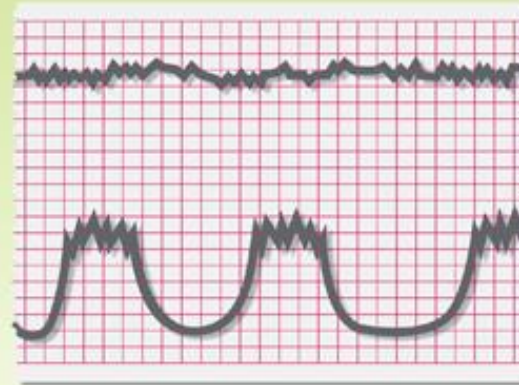




# Transition



The contractions are 1-2 minutes apart and last 60-90 seconds in duration. Evidence of breathing technique being used at peak of the contractions.



cervix

The cervix completes the process of dilation. The baby begins to rotate towards the mother's backbone with the baby's chin tucked on its chest. This is the best position for birth because the head must align with the widest part of the mother's pelvic outlet.

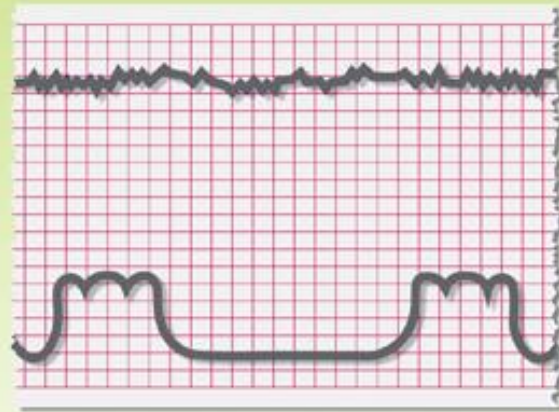
Her focus is very inward during transition.



# Pushing

Finds strength and energy – “light at the end of the tunnel”

Contractions may space out and be every 3 to 5 minutes lasting 60-90 seconds in duration. Pushing evident on contraction pattern.



Head is crowning





Hands and knees



Squat with support



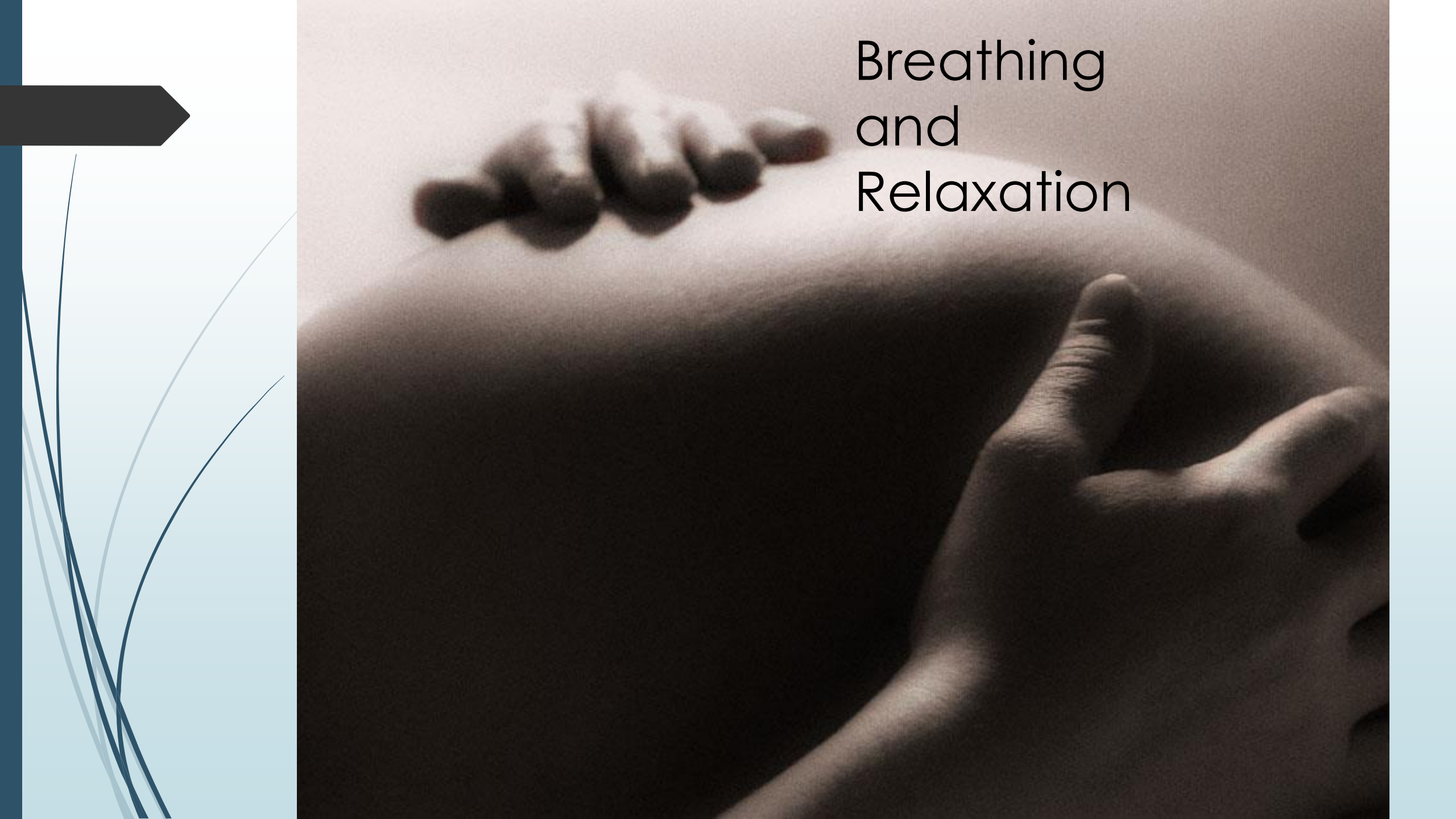
Side-lying



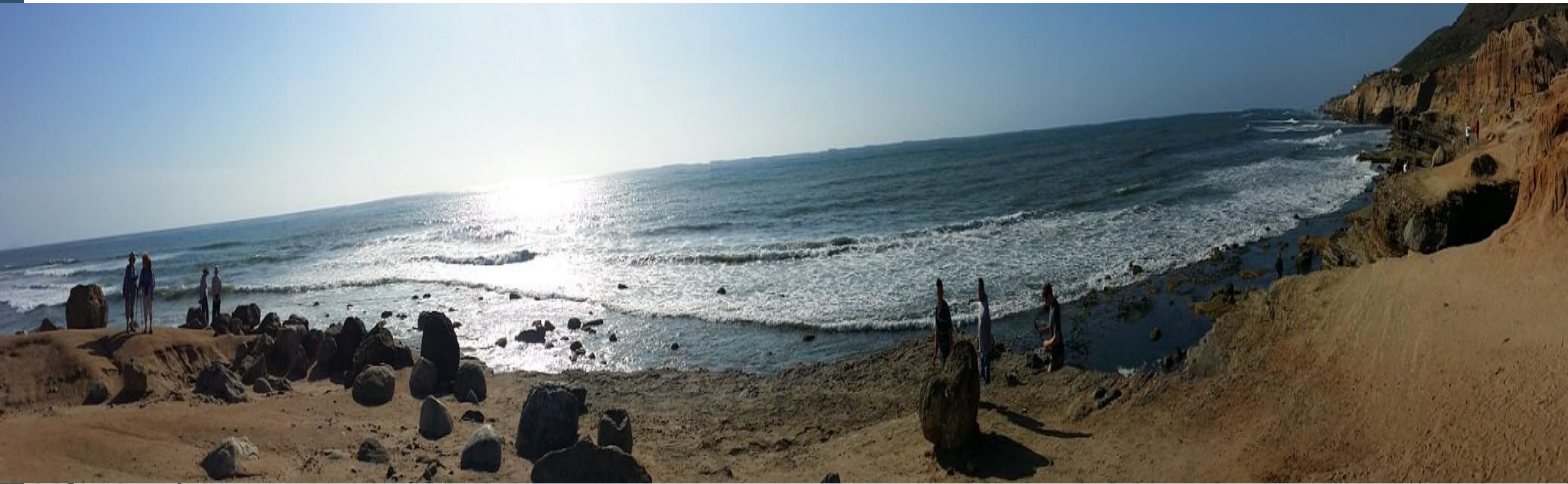
"C" position



# Breathing and Relaxation







# *Relaxation*

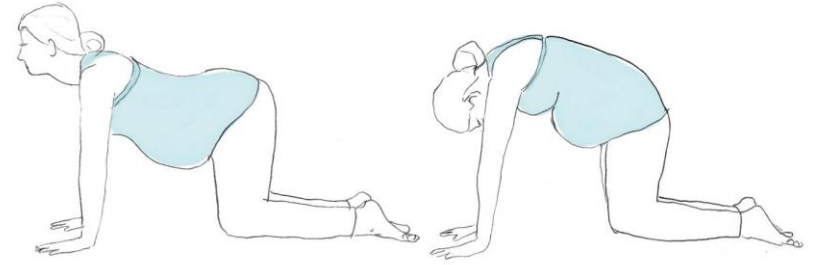
Relaxation is valuable key in breaking the Fear, Tension, Pain cycle

# Touching Exercises



# Stretches and positions

- “V” Press
- “Knee Press”
- Counter Pressure



- “Cat” and “Cow”
- Supine Spinal Twist



# Changing Positions

The more you can be up and moving, the easier it can be for baby to descend into the pelvis. Move when you can!



Have a great week!

