

WHEN TO CALL THE HOSPITAL

ADVICE FOR WOMEN IN LATE PREGNANCY



the women's
the royal women's hospital
victoria australia

Sometimes during late pregnancy, changes may occur that can concern some women. Many of these concerns can be raised and discussed at your clinic appointment, however some should be discussed with a midwife as soon as possible.

When should I call the hospital?

You should contact the hospital if you experience any of the following symptoms occur:

- If your waters break (this may occur before or after labour contractions begin).
- If you have vaginal bleeding that is not mixed with mucous. Vaginal bleeding with lots of mucous is called a 'show' and is a sign that labour is progressing normally. You can also get a 'show' if you have had a vaginal examination during your admission.
- If the contractions are regular, last more than 30 seconds and are closer than 5 minutes apart.
- If you are frightened or unsure about what is happening
- If you need drugs for pain management.
- If you do not feel your baby moving.

Who should I call?

To speak with a midwife at the hospital about any of these concerns, you should call **(03) 8345 3635**. Do not call this number for general enquiries.

Am I in labour?

It is not unusual for some women to have more than one admission before labour is fully established, especially if this is your first baby.

Sometimes early labour is called the latent phase of labour, or pre-labour. If you are having a baby for the first time, pre-labour may last for a few hours, days or weeks.

The irregular contractions that you may feel during this time are making your cervix (the neck of the womb) soften and thin out, ready to open further. Most women experience contractions as similar to intermittent period pains.

When should I come to hospital?

Research tells us that for well, full term women and babies, the best place to spend this phase of labour is at home. Well, full term, means that your pregnancy is more than 37 weeks gestation and you and your baby are well.

If you have been given any different information related to your individual circumstances, please follow those specific instructions.

At home, you have the freedom of your own surroundings. You can eat, sleep and move around at your own pace.

Listen to your body and do what you instinctively feel is right for you. Remember that your experience is uniquely yours.

STAGE/PHASE OF LABOUR	FEELINGS	HAPPENINGS	HELPFUL IDEAS
<p>Pre-labour:</p> <p>Cervix starting to thin</p> <p>Irregular mild, short contractions</p> <p>May last a few days</p>	<p>Excited, apprehensive</p> 	<ul style="list-style-type: none"> • Mucous tinged with blood • Backache • Lower abdominal pain (like period pain) • Sometimes diarrhoea • Sometimes waters break • You may feel tired 	<ul style="list-style-type: none"> • Life as normal • Move around, keep busy • Rest if you need to
<p>1st stage: early phase (8–16hrs)</p> <p>Cervix 0–4cm dilated (open)</p> <p>Contractions are regular, 5–20 mins apart, lasting 20–40 seconds</p>	<p>Excited, apprehensive</p> 	<ul style="list-style-type: none"> • You may feel tired • Mucous tinged with blood • Backache • Lower abdominal pain (like period pain) • Sometimes diarrhoea • Sometimes waters break 	<ul style="list-style-type: none"> • Keep eating and drinking (small amounts often) • Move around, keep busy • Rest if you need to • Empty your bladder every two hours • Time your contractions (from start of one to start of the next) • Call the hospital
<p>1st stage: active phase (3–5hrs)</p> <p>Cervix 4–8cm dilated</p> <p>Contractions are 3–7 mins apart, lasting 50–60 seconds</p>	<p>Becoming weary, restless</p> 	<ul style="list-style-type: none"> • Contractions, strong and regular • Intense, lower abdominal pain • Backache may continue • Totally focused on labour • Dependent on support people • Blood tinged mucous • Waters may break 	<ul style="list-style-type: none"> • Use deep breathing • Focus • Take a hot shower or use hot packs • Change positions • Rest between contractions • Sip fluids/suck sweets
<p>1st stage: transition (1/2–2hrs)</p> <p>Cervix 8–10cm dilated</p> <p>Contractions 2–3 mins apart, lasting 60–80 seconds</p>	<p>Becoming weary, restless</p> 	<ul style="list-style-type: none"> • Long, strong contractions • May have double peaks • May feel anal pressure and urge to push • Intense tiredness • Maybe nausea and vomiting • Shaky • Feelings of panic 	<ul style="list-style-type: none"> • Try a position change • Massage your back and thighs • Place a cool flannel on your face and neck • Listen to people's reassurance • Believe in your body
<p>2nd stage: pushing (1/2–2 hrs)</p> <p>Cervix fully dilated (10cm)</p> <p>Contractions 2–5 mins apart, lasting 60–90 seconds</p>	<p>Working hard</p> 	<ul style="list-style-type: none"> • Contractions space out • Pain is less intense, more pressure • Strong urge to push • Stretching, burning as baby's head moves down 	<ul style="list-style-type: none"> • Push with contractions (use a mirror) • Rest between contractions • Cool flannel or spray to face and neck • Listen to support people – you may need to pant through the strong urge to push to slow down the birth of the baby's head