

Course Title: MOD4-MW320-Intrapartum Risk Screening

Credits: 1.00

Course Description: In this course, students will gain basic understanding of how the midwife determines the normal progression of labor and delivery. Students will learn how to evaluate the risk status of a mother at the onset and duration of labor. The student is asked to evaluate the risk factors that can arise in the intrapartum period and gain understanding of how to recognize or rule out signs and symptoms of complications that can change the mother's risk status.

Learning Objectives:

- A: Students will be able to answer the Study Questions (below).
 B: Student will be able to demonstrate thorough knowledge of the Clinical Skills required for this course (below).
 C: Student will demonstrate thorough knowledge of the MANA Core Competencies for Midwives required for this course (below).
 D: Students will be able to demonstrate knowledge of any new information in the area of study.

Learning Activities:

- I. Student Reads required texts.
- II. Student Completes study questions.
- III. Preceptor elaborates on study questions.
- IV. Clinical Skills and Core Competencies training consists of the following (may take place at clinical visits or at childbirth education classes):

1. Preceptor Explanation of	Safe, evidence-based midwifery care for the individual Clinical Skills and Core Competencies including etiology, sequelae, appropriate management and follow-up for the individual patient, appropriate times and reasons for consult and referral, access to relevant resources and information, complete, thorough and timely record keeping, appropriate, professional, and compassionate management of every task involved, receptiveness and responsiveness to patient's concerns. The Explanation will include a discussion of midwifery decisions and actions as they relate to possible outcomes and their wider impact, based on the Midwives Model of Care®.
2. Preceptor Demonstration of	
3. Student Practice of	
4. Student Demonstration of	

- V. Student researches and presents to the preceptor relevant latest developments in academic and clinical midwifery as relevant to the subject.
- VI. Student/Preceptor discussion.
- VII. Role-playing and Clinical Interactions: practice clinical interactions, assist with actual clinicals.

Learning Materials / Resources:

(Please use textbooks less than 5 years old, or most recent edition)

1. Frye, Anne. Holistic Midwifery: A Comprehensive Textbook for Midwives in Homebirth Practice, Vol. 2: Care of the Mother and Baby from the Onset of Labor Through the First Hours After Birth. Labrys Press. 2004.

2. Weaver, Pam and Evans, Sharon K. Practical Skills Guide for Midwifery, 4th Edition. Morningstar Publishing Co. Wasilla. 2007
3. MEAC Abbreviated NARM Skills Form.
4. MANA Core Competencies for Midwives
5. Midwives Model of Care®.
6. Internet links as needed for latest developments in midwifery care:
[The Cochrane Collaboration](#)
[EBSCO](#)
[National Library of Medicine](#)
[PubMed](#)
[Medline](#)
[SCIRUS](#)
[Medscape](#)
[World Health Organization](#)

Evaluation Tools / Methods:

1. Answers to study questions: Student must achieve at least 80% correct to pass. The preceptor evaluates each answer for correctness and explains the questions that were incorrect. This counts for 85% of the final grade.
2. Clinical Skills: Student must demonstrate thorough knowledge of each skill. This counts for 5% of the final grade. *Academic courses CAN be completed without the student achieving "mastery" of each skill*, however the skills on the MEAC Abbreviated NARM Skills Form (which is a separate requirement) are not filled in until the student achieves Mastery* of the skill.
3. MANA Core Competencies: Student's ability to apply MANA Core Competencies for Midwives in discussion to simulated and real-life situations. This counts for 5% of the final grade.

Evaluation of NARM Skills and MANA Core Competencies: The student demonstrates thorough knowledge to the satisfaction of the preceptor in the following areas:

- The student will be able to, in accordance with safe, evidence-based midwifery care, explain the condition, verbalize etiology and sequelae, verbalize appropriate management for the individual patient, follow up appropriately, consult and refer appropriately, access resources and information, accomplish complete, thorough and timely record keeping, appropriately manage every task involved correctly, professionally, and compassionately, while being receptive and responsive to patient's concerns. She/he will be able to explain her decisions and actions as they relate to possible outcomes and their wider impact.*
4. Student presentation of new information in area of study. The preceptor evaluates the correctness of the information presented. This counts for 5% of the grade.

Study Questions

1. Discuss what history should be obtained at the beginning of labor to identify possible risks.

2. Explain how to differentiate between true and false labor.
3. Discuss how to differentiate between IUGR and SGA.
4. Explain what indicates progress and pelvic adequacy.
5. Explain how to rule out rupture of membranes and how to handle rupture of membranes to prevent infection.
6. Explain how parity affects the duration of labor and the incidence of complications.
7. Discuss which fetal positions must be ruled out.
8. Discuss which normal fetal positions increase duration of labor or complications.
9. Discuss what qualities of the contraction must be monitored to rule out complications.
10. Describe how vital signs and changes in them are used to rule out complications.
11. Discuss what complications edema might indicate and what additional physical findings confirm or rule out these complications.
12. Discuss how the estimated fetal weight will affect risk status in this labor as compared to past labors.

Clinical Skills (NARM Skills)

I. Midwifery Counseling, Education and Communication

- (1)-I A. Provides interactive support and counseling and/or referral services to the mother regarding her relationships with her significant others and other healthcare providers
- (2)-I B. Provides education, support, counseling and/or referral for the possibility of less-than-optimal pregnancy outcomes
- (3)-I C. Provides education and counseling based on maternal health/reproductive/family history and on-going risk assessment
- (4)-I D. Facilitates the mother's decision of where to give birth
- (5)-I E. Educates the mother and her family/support unit to share responsibility for optimal pregnancy outcome
- (6)-I F. Educates the mother concerning the natural physical and emotional processes of pregnancy, labor, birth and postpartum

- (7)-I G. Applies the principles of informed consent
- (8)-I H. Provides individualized care
- (9)-I I. Advocates for the mother during pregnancy, birth and postpartum
- I J. Provides education, counseling and/or referral, where appropriate for:
 - (10)-I J 1. Genetic counseling for at-risk mothers
 - (11)-I J 2. Abuse issues: emotional, physical and sexual
 - (12)-I J 3. Prenatal testing
 - (13)-I J 4. Diet, nutrition and supplements
 - (14)-I J 5. Effects of smoking, drugs and alcohol use
 - (15)-I J 6. Situations requiring an immediate call to the midwife
 - (16)-I J 7. Sexually transmitted diseases
 - (17)-I J 8. Complications
 - (18)-I J 9. Environmental risk factors
 - (19)-I J 10. Newborn care including normal/abnormal newborn activity, responses, vital signs, appearance, behavior, etc
 - (20)-I J 11. Postpartum care concerning complications and self-care

II. General Healthcare Skills

- (23)-II C. Demonstrates the application of aseptic technique
- II D. Demonstrates the use of instruments and equipment including:
 - (26)-II D 3. Blood pressure cuff
 - (31)-II D 8. Gestation calculation wheel/calendar
 - (34)-II D 11. Lancets
 - (35)-II D 12. Newborn and adult scale
 - (36)-II D 13. Nitrazine paper
 - (37)-II D 14. Needle and syringe
 - (40)-II D 17. Speculum
 - (41)-II D 18. Stethoscope
 - (43)-II D 20. Tape measure
 - (44)-II D 21. Thermometer
 - (45)-II D 22. Urinalysis strips
 - (46)-II D 23. Urinary catheter
 - (47)-II D 24. Vacutainer/blood collection tube
 - (48)-II D 25. Vaginal culture equipment
- (51)-II G. Refers to alternate healthcare practitioners for non-allopathic treatments
- II H. Treats for shock by:
 - (52)-II H 1. Recognizing the signs and symptoms of shock, or impending shock
 - (53)-II H 2. Assessing the cause of shock and providing treatment for shock
- (55)-II J. Recommends the use of vitamin and mineral supplements
- II K. Administers the following pharmacological (prescriptive) agents:
 - (57)-II K 2. Medical oxygen
 - (58)-II K 3. Methergine
 - (59)-II K 4. Prescriptive ophthalmic prophylaxis ointment (e.g., erythromycin)
 - (60)-II K 5. Pitocin ®
 - (61)-II K 6. RhoGam ®
- (63)-II M. Uses Doppler

III. Maternal Health Assessment

(65)-III A. Obtains and maintains records of health, reproductive and family medical history

(66)-III *B. Performs an initial history and physical examination including vital signs

IV. Labor, Birth and Immediate Postpartum

(93)-IV A. Facilitates maternal relaxation and provides comfort measures throughout labor

(94)-IV B. Evaluates and supports a laboring mother during the first stage of labor by assessing a variety of factors

(95)-IV C. Knows a variety of treatments for anterior/swollen lip

(96)-IV D. Demonstrates the ability to evaluate and support a laboring mother during the second stage of labor

IV E. Demonstrates the ability to recognize and respond to labor and birth complications such as:

(97)-IV E 1. Abnormal fetal heart tones and patterns

(98)-IV E 2. Cord prolapse

IV E 3. Variations in presentation such as:

(99)-IV E 3 a) Breech presentation

(100)-IV E 3 b) Nuchal hand, arm presentation

(101)-IV E 3 c) Nuchal cord presentation

(102)-IV E 3 d) Face and brow presentation

(103)-IV E 3 e) Multiple birth presentation and delivery

(104)-IV E 3 f) Shoulder dystocia

(105)-IV E 4. Management of meconium stained fluids

(106)-IV E 5. Management of maternal exhaustion

IV F. Assesses the condition of, and provides care for the newborn immediately after the birth by:

(107)-IV F 1. Making initial newborn assessment

(108)-IV F 2. Determining APGAR score

(109)-IV F 3. Monitoring respiratory and cardiac function

(110)-IV F 4. Responding appropriately to the need for newborn resuscitation

(112)-IV F 6. Administering eye prophylaxis

(113)-IV F *7. Performing a newborn examination

IV G. Assists in placental delivery and responds to blood loss by:

(114)-IV G 1. Determining signs of placental separation

(115)-IV G 2. Facilitating the delivery of the placenta

(116)-IV G 3. After delivery, assessing the condition of the placenta

(117)-IV G 4. Estimating the amount of blood loss

(118)-IV G 5. Responding to uterine bleeding with a range of treatments

IV G 6. Responding to postpartum hemorrhage with a range of treatments, including:

(119)-IV G 6 a) Administration of medication

(120)-IV G 6 b) Administration of oxygen

(121)-IV G 6 c) Administration of intravenous fluids or appropriate referral for intravenous fluids

(122)-IV G 6 d) Treatment for shock

(123)-IV G 7. Manually removing placenta fragments and/or retained membranes with a sterile, gloved hand

(124)-IV H. Assesses general condition of mother and newborn by a variety of criteria

(125)-IV I. Performs catheterization when needed

IV J. Repairs the perineum by:

(126)-IV J 1. Administering a local anesthetic

(127)-IV J 2. Performing basic suturing

(128)-IV K. Provides instruction for care and treatment of the perineum

IV L. Facilitates breastfeeding by assisting and teaching about a variety of factors impacting breastfeeding, including:

(129)-IV L 1. Adequate maternal nutrition

(130)-IV L 2. Maternal comfort measures for engorgement

Core Competencies (MANA Core Competencies for Midwives)

I. Guiding Principles of Practice.

The midwife provides care according to the following principles:

1 H. Midwives recognize the empowerment inherent in the childbearing experience and strive to support women to make informed decisions and take responsibility for their own well-being.

1 I. Midwives strive to insure vaginal birth and provide guidance and support when appropriate to facilitate the spontaneous process of pregnancy, labor and birth, utilizing medical intervention only as necessary.

1 J. Midwives synthesize clinical observations, theoretical knowledge, intuitive assessment and spiritual awareness as components of a competent decision making process.

1 K. Midwives value continuity of care throughout the childbearing cycle and strive to maintain continuous care within realistic limits.

1 L. Midwives understand that the parameters of “normal” vary widely and recognize that each pregnancy and birth is unique.

II. General Knowledge and Skills

The midwife provides care incorporating certain concepts, skills and knowledge from a variety of health and social sciences including, but not limited to:

2 C. Community standards of care for women and their developing infants during the childbearing cycle, including midwifery and bio-technical medical standards and the rationale for and limitations of such standards

2 M. The ability to develop, implement and evaluate an individualized plan for midwifery care.

2 N. Woman-centered care, including the relationship between the mother, infant and their larger support community.

2 O. Knowledge and application of various health care modalities as they apply to the childbearing cycle

IV. Care During Labor, Birth and Immediately Thereafter

The midwife provides health care, support, and information to women throughout labor, birth and the hours immediately thereafter. She determines the need for consultation or referral as appropriate. The midwife uses a foundation of knowledge and/or skill which includes the following:

- 4 A. The normal process of labor and birth.
- 4 B. Parameters and methods for evaluating maternal and fetal well-being during labor, birth and immediately thereafter, including relevant historical data.
- 4 C. Assessment of the birthing environment, assuring that is clean, safe and supportive, and that appropriate equipment and supplies are on hand.
- 4 F. Fetal and maternal anatomy and their interactions as relevant to assessing fetal position and the progress of labor.
- 4 G. Techniques to assist and support the spontaneous vaginal birth of the baby and placenta.
- 4 H. Fluid and nutritional requirements during labor, birth and immediately thereafter.
- 4 I. Assessment of and support for maternal rest and sleep as appropriate during the process of labor, birth and immediately thereafter.
- 4 J. Causes of, evaluation of and appropriate treatment for variations which occur during the course of labor, birth and immediately thereafter.