



GYNECOLOGICAL AND OBSTETRICAL EMERGENCIES

Effective: April 27, 2017
Replaces: June 2012
Review: April 27, 2022

1. BLS Treatment

- 1.1. Routine Medical Care – Adult **(700-S04)**
 - 1.1.1. **Oxygen** – titrate as appropriate
- 1.2. Treat for signs and symptoms of shock as appropriate **(700-A10)**
- 1.3. Consider left lateral recumbent position if appropriate (Hypotensive)
- 1.4. Monitor vital signs frequently

2. ALS Treatment

- 2.1. **Vascular Access (IV)**, TKO

3. Vaginal Bleeding (Postpartum)

- 3.1. Fundal massage to decrease bleeding

4. Spontaneous Abortion

- 4.1. If fetus is 20 weeks or greater or heavier than one (1) pound, attempt resuscitation **(700-P18)**
- 4.2. If fetus is non-viable, save and transport any tissue or fetal remains with the mother
- 4.3. Have patient place a sanitary napkin or bulky dressings over vaginal opening, **Do Not** pack the vaginal opening

5. Pregnancy Induced Hypertension (Severe Pre-Eclampsia, Eclampsia, Post Eclampsia)

- 5.1. Observe for seizures, hypertension or coma
- 5.2. If actively seizing, **Midazolam 2.5mg slow IVP**, may repeat in 2 minutes to a maximum dose of 5mg **(700-A02)**
- 5.3. **BASE CONTACT**: if additional Midazolam above 5mg is needed

6. Breech Delivery

- 6.1. Allow delivery to proceed passively until the baby's waist appears. Gently rotate the baby's body to a face down position and continue with delivery
- 6.2. If head does not readily deliver insert a gloved hand into the vagina to relieve pressure on the umbilical cord and create an air passage for the infant
- 6.3. Monitor vital signs and infant condition frequently

7. Prolapsed Cord

- 7.1. Place mother in the supine position with the head lower than the hips
- 7.2. Insert a gloved hand into the vagina and gently push the presenting part of the baby (head or shoulder) off of the umbilical cord. **Do Not** tug on the umbilical cord
- 7.3. Place fingers on each side of the baby's nose and mouth, split fingers into a "V" to create an opening. **Do Not** attempt to re-position the cord. **Do Not** remove your hand. Cover the exposed umbilical cord with saline soaked gauze.

8. Limb Presentation

- 8.1. Place mother in knee to chest position
- 8.2. Transport emergently to closest hospital **(Policy 602)**