

Outpatient Induction of labour

Can I have my induction of labour and be at home?

This leaflet will tell you how an induction of labour can occur outside of the hospital setting.

Date and Time for your FAU Outpatient IOL APPOINTMENT:

Date and Time for your Delivery Suite IOL APPOINTMENT:



Outpatient Induction of Labour

What is an Induction of Labour?

Induction of labour (IOL) is the process of starting <u>labour artificially</u>. In the UK almost 20% of births are induced for a variety of reasons, mainly induction of labour happens because pregnancy has gone past the expected due date.

Walsall Maternity Services perform inductions of labour both in the hospital or as an outpatient and this leaflet will give you information about **Outpatient Induction of Labour (IOL).**

An **Outpatient IOL** will only be offered if your pregnancy has been **low risk.** You will normally be offered this method IOL if your pregnancy is 10- 12 days past your due date.

However, your midwife will have a discussion with you about the **Outpatient IOL** process and if you meet all the necessary criteria you will be offered this method.

Why have an Outpatient IOL?

It will reduce the amount of time you will need to stay in hospital before you are in labour



- It allows you to stay at home and wait for your labour to start naturally (within an agreed time frame)
- Makes the whole process of IOL more normal
- Allows your birthing partner(s) to remain with you throughout your induction process

Who can have an Outpatient IOL?

- Your pregnancy is deemed to be low risk
- You have not had any episodes of bleeding in your pregnancy
- You have no medical or pregnancy reasons that are not advised for this method of induction
- You have had no operations to your womb uterine surgery
- You do not have any language barriers and are able to understand the process well
- You have someone to stay at home with you following your outpatient IOL
- You have transport available to return to hospital
- You live within a 30-minute driving distance from the hospital and have access to a telephone at all times.



What Happens on the Day of my Outpatient IOL?

Your midwife will arrange for you to attend our fetal assessment Unit (FAU) situated on Route 122 for a review and to commence your Outpatient IOL.

You will be given an appointment time to attend, please attend on time so that your IOL process can begin as soon as possible.

Please remember to bring any pregnancy records (if appropriate) or any documents relating to your pregnancy. You may want to bring an overnight bag just in case we cannot proceed with your induction as an outpatient and your induction needs to commence in hospital.



STEP ONE: Arrival and Assessment

On arrival to our FAU you will be assessed to ensure you are still suitable for your IOL as an outpatient. This will include:

Recording your observations: this includes your pulse, temperature, urinalysis and blood pressure.

An examination of your abdomen to check the size and position of your baby.



A monitoring of your baby's heartbeat for approximately 30 minutes using the cardiotocograph (CTG) machine. This machine also monitors any contractions or tightenings of your womb that you may be having.



STEP TWO: Examination

If your assessments are all normal (from Step one above) the midwife/doctor will ask your permission to perform an internal examination (vaginal examination) to check the neck of the womb (cervix). During this examination the midwife/Doctor will insert the Dilapan-S that is used for induction of labour as described below.



STEP THREE: Induction

What is Dilapan -S

Dilapan –S is a small rod that gradually absorbs fluid in the neck of womb (Cervix); this increases in size and dilates the cervix. These rods do not contain any medicine/ drugs and is a mechanical way of dilating (opening) your cervix. This mechanical induction stimulates your cervix to



release your natural hormones needed to ripen the neck of your womb in readiness for labour.

If your neck of the womb (cervix) is closed as is expected, then the induction will be performed by inserting dilapan rods into your cervix. These will remain inside your cervix for up to 24 hours. Some women may experience some discomfort during the examination. Please let your midwife /doctor know and we can provide some Enotonx for use if you feel you need this.

After the Dilapan S has been inserted you will be advised to stay lying down for around 30 minutes, this is to allow the Dilapan S to absorb moisture from your cervix which will cause it to expand and settle into place. This reduces the chance of it falling out.

Your baby's heartbeat will be monitored again using the CTG machine, if all is well you will be encouraged to mobilise around the hospital for 30 minutes before returning to FAU to ensure all is well.

You will need to:

- Take care when visiting the toilet not to pull on the threads which are on the end of the Dilapan rod.
- Inform a member of the midwifery team immediately if the rods falls out [retrieval and



reinsertion may be possible if appropriate]. You will then be transferred home if all remains well.



STEP FOUR: Your time at home

- You can continue your normal day to day activity
- Eat and drink as normal
- Stay active and mobilise as much as possible
- Note any changes in your Monitor your baby's movements

Please DO NOT attempt to remove the Dilapan-S yourself.

 Please avoid bathing, douching and any sexual intercourse while the Dilapan-S is in place

POSSIBLE SIDE EFFECTS FROM Dilapan-S (USUALLY MILD)

- Fainting episode-This is a temporary state of dizziness, nausea, paleness or loss of consciousness that can be caused by cervical manipulation.
- By lying flat for 3-10 minutes these symptoms usually disappear and if they do not then you will be reviewed by a senior clinician



REMEMBER

CONTACT TRIAGE / FETAL ASSESSMENT UNIT

IF YOU EXPERIENCE ANY OF THE FOLLOWING:

- You think your waters have broken
- · You have any vaginal bleeding
- Your Dilapan –S rods fall out
- You are worried about your baby's movements
- You experience tightening's / contractions that are strong and regular
- You are concerned at all.

Fetal Assessment Unit: 01922 656249

Maternity Triage: 01922 656967

If there are no concerns, you will stay at home and return to hospital the following morning for admission to delivery suite.

On Delivery suite

Once your cervix has dilated enough for your waters to be broken, you and your birth partner will then be transferred to a Delivery room to continue with your induction of labour.



Your membranes (sac of waters) around your baby will be artificially broken, in some women this can cause a surge of hormones that may cause your contractions to start.

You will be encouraged to mobilise for 1-2 hours after breaking your waters to encourage your body to kick start into labour.

If your labour or contractions do not commence through the breaking of your waters alone, then we will aim to start an infusion (Syntocinon) intravenously (administered via a small plastic tube placed in your hand into a vein). This will build contractions over a number of hours and encourage your labour to progress. During this you and baby will be monitored closely during the process.



Where can I find further information?

You can watch a video in YouTube on how Dilapan-S works at this link: www.youtube.com/watch?v=xRfwASb7Ch4

To read up the useful information at this link:

https://www.dilapan.com

To access to the patient information leaflet from the Dilapan-S

Website homepage at this link:

http://dilapan.wpengine.com/wpcontent/uploads/2019/06/DS pacienti USA-bez-ARM_UP.pdf

Write any questions you may have on here, your Midwife/Doctor will be happy to discuss with you.