

# Should I Stay or Should I Go? – Emergency Childbirth

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<p>Objectives</p> <ul style="list-style-type: none"><li>•Discuss maternal assessment</li><li>•Review maternal complications</li><li>•Discuss stages of labor</li><li>•Describe normal delivery</li><li>•Discuss delivery complications</li><li>•Review resuscitation techniques</li></ul>	
<p>Case Review</p> <ul style="list-style-type: none"><li>•32 year old patient in labor</li><li>•39 weeks gestation</li><li>•ETA to scene 6 minutes</li><li>•ETA to hospital 20 minutes</li></ul>	
<p>Obstetrical Terms</p> <ul style="list-style-type: none"><li>•<b>G</b>ravida</li><li>•<b>P</b>ara</li><li>•<b>A</b>abortus</li><li>•<b>L</b>iving</li> <li>•<b>G</b>ravida</li><li>•<b>T</b>erm</li><li>•<b>P</b>remature</li><li>•<b>A</b>abortus</li><li>•<b>L</b>iving</li> <li>•<b>G</b>estation</li><li>•<b>P</b>rimagravida</li><li>•<b>M</b>ultigravida</li><li>•<b>N</b>ullipara</li><li>•<b>P</b>rimipara</li><li>•<b>M</b>ultipara / <b>G</b>rand multipara</li></ul>	









Postpartum Hemorrhage

Delivery Complications

Fetal Position  
Breech Delivery  
Limb Presentation  
Transverse Lie

Multiple Gestation

Premature Labor

Summary

- Most deliveries are uneventful
- Basic support and assistance are all that is required
- Complicated deliveries are rare
- Identification of complicated deliveries is crucial to the safety of the mother and baby
- When all else fails..... take a deep breath!