

Southern Illinois Regional EMS System

FF-4 NEWBORN AND POSTPARTUM CARE POSTPARTUM HEMORRHAGE

ALS/ILS/BLS

1. Newborn:
 - 1.1. Access the airway, breathing, circulatory status of the neonate:
 - 1.1.1. If in distress, refer to Neonatal Resuscitation (FF-6) SOP.
 - 1.2. Initial care immediately after delivery:
 - 1.2.1. Keep infant level with mother's uterus.
 - 1.2.2. Note the date and time of delivery.
 - 1.2.3. Suction mouth first the nose with a neonatal bulb syringe.
 - 1.2.3.1. Repeat as needed.
 - 1.2.4. Dry and warm the neonate:
 - 1.2.4.1. Keep head covered.
 - 1.2.4.2. Wrap in warm blanket.
 - 1.2.5. Stimulate the infant by gently rubbing the back or feet.
 - 1.2.6. Spontaneous ventilations should begin in 30 seconds.
 - 1.2.6.1. If not refer to Neonatal Resuscitation (FF-6) SOP.
 - 1.3. Clamp the cord at 6 inches and 8 inches from the infant's body, 45 seconds after birth or when the cord stops pulsating.
 - 1.3.1. Cut between the clamps with sterile scissors/scalpel in OB pack:
 - 1.3.1.1. If no sterile implement is available:
 - 1.3.1.1.1. Leave cord clamped and do not cut.
 - 1.3.2. Check the cord ends for bleeding.
 - 1.3.3. Lie infant on mother's abdomen for transport.
 - 1.4. Obtain 1 minute and 5 minute APGAR scores.
 - 1.5. If neonate is dusky:
 - 1.5.1. Place a neonatal oxygen mask 1 inch from baby's face with 100% oxygen.
 - 1.5.1.1. Refer to Neonatal Resuscitation (FF-6) SOP as indicated by breathing, heart rate and color.
 - 1.6. Place ID tags on the mother and infant.
 - 1.7. Transport together when possible.
 - 1.8. Notify medical control as soon as possible when caring for the newborn.
2. Mother:
 - 2.1. Placenta should be delivered in 20-30 minutes. If delivered:
 - 2.1.1. Collect in plastic bag from OB kit and transport to hospital.
 - 2.1.2. Do not pull on cord to facilitate delivery of the placenta.
 - 2.1.3. Do not delay transport awaiting placenta delivery.
 - 2.2. Keep mother warm:
 - 2.2.1. Cover with blankets.
 - 2.3. If perineum is torn and/or bleeding:
 - 2.3.1. Apply direct pressure with sanitary pads and have patient bring legs together.
 - 2.3.2. Apply cold packs to perineum over pad.
 - 2.4. Massage to of uterus (fundus) until firm:
 - 2.4.1. Check frequently during transport.
 - 2.5. Observe for signs of hypoperfusion:
 - 2.5.1. Obtain vital signs.

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3. Postpartum Hemorrhage:
 - 3.1. ALS/ILS:
 - 3.1.1. If signs of hypoperfusion:
 - 3.1.1.1. Initiate IV fluid challenge in 200ml increments.
 - 3.1.1.2. Titrate to patient response.
 - 3.2. Massage top of uterus (fundus) until firm.
 - 3.3. 100% oxygen per NRM.
 - 3.4. (ALS) Contact Medical Control and consider Oxytocin
 - 3.4.1 **3-10 units IM**, following delivery of placenta(s)
 - 3.5 Rapid transport.