

What To Do When You Think You Are In Labour

Active labour is generally defined as when your cervix has dilated to 4 or 5 centimetres **AND** you are having regular, strong contractions. Everything leading up to that point is early labour. Here are some tips to help you determine when active labour has begun.

Time a few contractions from the beginning of one to the beginning of the next one. Note the amount of time that the contraction lasts. You *do not* need to time every contraction during your entire labour. It is usually a good idea to time 4 or 5 contractions every 1 to 2 hours, or when you notice a change in their intensity. In active labour, contractions almost always settle into a *very regular pattern*. If your contractions are still irregular, you are likely in early labour. The contractions of active labour are usually so regular you could set your watch by them. Also, early labour contractions may change if you alter your activity (e.g. changing positions, taking a bath, lying down, walking around, etc.) The strength and frequency of active labour contractions will not lessen no matter what activity you do. In active labour, your contractions will gradually become:

Longer Stronger, and Closer Together

The intensity of the contractions is much stronger during active labour than in early labour. Early labour contractions are usually a bit stronger than strong menstrual cramps. Labour contractions are so strong that they take your breath away and require your entire concentration to cope with each one.

Provided that your water has not broken, try taking a bath. Stay in the tub for at least 20 or 30 minutes. If you are in early labour, the warm water will often cause the contractions to space out and/or become less intense. Active labour contractions may *feel* better in the tub, but if they continue to come just as often and as strong as before, you may be in active labour.

Strategies in early labour:

- Ignore this phase as long as possible, and continue with your daily activities.
- Take 1000mg Tylenol and 50mg Gravol orally every 6 hours as needed for rest and pain relief.
- Try taking a shower, or soak in a bath as long as your water hasn't broken.
- Apply a heating pad, hot water bottle, or 'magic bag' to the area that hurts the most.
- Continue eating, drinking and resting throughout early labour.
- Do something to take your mind off the early labour contractions, such as watching a funny movie, playing a game, going for a walk, baking a batch of cookies, etc.

When to page the on-call care provider:

Page if you have urgent concerns or if you need support. *If you feel rectal pressure or an urge to push during contractions, page right away.* By the time the **4-1-1 rule*** applies, you should be paging us:

When your contractions are	4 minutes apart		*4-5 minutes apart
Each contraction lasts	1 minute long, and	or	½ minute long
This has been happening for	1 hour		½ hour

*If you have previously had a vaginal delivery, you should page by the time your contractions are 4-5 minutes apart, 30 seconds or longer for half an hour or more.

Call the Urgent Line at 778-355-9636, press '0' to reach the on-call provider 24/7.

If you haven't heard from the on-call care provider in 15 minutes, please page again.

If you still have not heard back after 30 minutes, go to Royal Columbian Hospital or call 911.

What To Do If Your Water Breaks Before Labour

During the Night

When your water breaks, it is first important to ensure that:

- The fluid is clear, straw-coloured, or pink-tinged (not green, brown or dark red),
- You are Group B Strep (GBS) negative,
- Your baby is moving normally within 20 minutes of your water breaking, and
- You are at least 37 weeks (full term).

If any of the above is not true for you, page the on-call care provider right away.

If all of the above are true for you and you are **not** having regular contractions, you can either page the Urgent line for assessment or note the time that your water broke, put on a pad, go to bed, and page the on-call care provider between 8-9am, or earlier if you start having regular, strong contractions or have any concerns. You may have some mild cramping and have difficulty sleeping, but it is advisable to **rest** as much as possible through the night.

During the Day

If your water breaks during daytime hours, page the on-call care provider right away. They will want to know:

- What color is the fluid?
- How much fluid is there (1 tsp, 1 Tbsp, 1 cup)?
- Is your baby moving?
- What time did your water break?
- Are you Group B Strep (GBS) positive or negative?
- Are you having any contractions?

Once your water has broken:

- Do not have a bath (you may still have a shower).
- Do not put anything in your vagina (tampons, fingers, etc.).
- Change your pad frequently, and blot rather than wipe after urinating.
- Take your temperature every 4 hours, or sooner if you feel feverish. Page the on-call care provider if your temperature is 38.0 C or greater.

If we have told you that the baby's presenting part is high, or if the baby is in breech or transverse position:

- Page the on-call care provider right away when your water breaks, regardless of the time of day. *If you feel something hanging from the vagina, get into an all-fours position, call 911, and have your partner page us at the same time so we can meet you at the hospital.*
- While waiting for a response, kneel with your head and chest down, and your hips in the air.
- Do not put anything in your vagina.
- Pay attention to whether your baby is moving.

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