



Appendix 5: Initial assessment of an individual presenting with possible labour or ruptured membranes

History: Ask the client	<ul style="list-style-type: none">• Are you having contractions? If so: How strong? How often? How long do they last? When did they begin?• Have your waters broken (prelabour rupture of membranes)? If yes, when? Were they clear or green? (see Section 3.2.1 on PROM at term)• Have you had any bleeding? If yes, when? How much?• Is the baby moving?• Is there anything else you are concerned about?
Check the record (or ask the client/ accompanying person)	<ul style="list-style-type: none">• Based on estimated date of delivery, calculate current weeks of pregnancy to check if preterm (<37 weeks) (if preterm, refer to Section 4.4)• Review the birth plan• If any prior pregnancies: How many prior pregnancies/deliveries? Any prior caesarean deliveries, forceps or vacuum, or other complications such as post-partum haemorrhage? Any prior third- or fourth-degree tears?• Current pregnancy: Rapid plasma reagin status, haemoglobin results, tetanus immunization status, HIV status• Infant feeding plan• Any current medication
Examination	<ul style="list-style-type: none">• Observe response to contractions: Coping well or distressed? Pushing or grunting?• Check abdomen for caesarean delivery scar and/or horizontal ridge across lower abdomen; this may be a sign of obstructed labour (if present, empty bladder and observe again)• Feel abdomen for frequency and duration of contractions: Are there any continuous contractions? Is the fetal lie longitudinal or transverse? Is fetal presentation head, breech, other?• If no ultrasound of this pregnancy, check for >1 fetus (3 fetal poles on palpation) and for fetal movement• Listen to fetal heartbeat with Pinard or Doppler: Count number of beats in 1 minute; if <100 or >180 beats/minute, turn the client on their left side and count again• Measure blood pressure• Measure temperature• Look for pallor• Look for sunken eyes, dry mouth• Pinch the skin of the forearm: Does it go back quickly?
Warning signs to look out for during admission and labour	<ul style="list-style-type: none">• Bleeding• Severe abdominal pain• Severe headache or visual disturbance• Breathing difficulty• Fever or chills• Difficulty emptying bladder• Epigastric pain

Source: World Health Organization, United Nations Population Fund, World Bank and United Nations Children's Fund. Pregnancy, childbirth, postpartum and newborn care: a guide for essential practice. Third edition. Geneva: WHO; 2015. <https://apps.who.int/iris/handle/10665/249580>. Accessed 25 April 2022.