LABOR FLOW RECORD
AND DELIVERY SUMMARY

GRAVIDA	PARA	Ab	No. LIVING	AGE	LENGTH OF PREGNANCY *(Weeks)*	EDC

ONSET LABOR	MEMBRANES	BLEEDING	TYPE & RH	SEROLOGY
Date: Time:				

RISK FACTORS &
MANAGEMENT PLAN

HOURLY INCREMENTS *(2400 Clock)*	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:	:
Station and Dilatation (CM'S) 10																		
-4 9																		
-3 8																		
-2 7																		
0 = Dilatation -1 6																		
X = Station 0 5																		
+1 4																		
+2 3																		
+3 2																		
+4 1																		
0																		
HOURS	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18

RECORD ALL EXAMINATIONS SERIALLY FROM ADMISSION TO DELIVERY: PLEASE INITIAL AND INDICATE PROGRESS NOTE BY X

DATE & TIME	Blood Pr. Temp. Pulse	F.H.R.		Contractions		Vaginal Exam.			Observations: *(Bleeding; Amn. fluid color, etc.)* Procedures: *(Blocks, Amniotomy, etc.)*	Drugs - Fluids		Initials	See Progress Note
		Rate	? EFM	Freq.	Qual.	Eff.	Dil.	Sta.		Agent & Rt.	Amount		

PATIENT'S IDENTIFICATION	Signature Code: Initials	Signature & Title

DELIVERY SUMMARY

FIRST STAGE

ONSET	PROGRESS	MEDICATION	DURATION

SECOND STAGE

ONSET	ANESTHESIA	TIME & DATE OF DELIVERY	MEDICATION

SKIN PREPARATION	POSITION	EPISIOTOMY	LACERATION	DURATION

METHOD OF DELIVERY WITH INDICATIONS

THIRD STAGE

ONSET	METHOD AND TIME OF DELIVERY	MEDICATION

APPERANCE OF PLACENTA & CORD	DURATION

LABOR

COMPLICATIONS	EST. BLOOD LOSS	DURATION OF LABOR	DURATION OF RUPTURED MEMBRANES

INFANT

PERINATAL COURSE	SEX		APGAR RATING									
	WT.	GMS		1'	5'		1'	5'		1'	5'	
	LENGTH	CM	HEART RATE			TONE			COLOR			
MATURITY *(Circle)* SGA, AGA, LGA			RESP.			REFLEX			TOTAL			

REMARKS:	FETAL MONITORING SUMMARY:

SIGNATURE OF PROVIDER	DATE	SIGNATURE OF NURSE	DATE

POSTPARTUM COURSE

INSTRUCTIONS FOR THE USE OF FORM IHS-800-2
LABOR FLOW RECORD AND DELIVERY

Labor and Delivery Record-

A. *Risk Factors*

Prominent displays of identified risk factors and the indicated plan of management is essential for the most appropriate care of the patient and her baby.

B. *Friedman Curve*

Each vaginal examination performed should be indicated on the chart. The time of the exam should be indicated by the 24 hour clock. Cervical dilatation is recorded by "open circles" and the station of the presenting in part by "X's".

C. *Observations and Procedures*

1. *Time*
   Record as per the 24-hour clock.

2. *Blood pressure, temperature and pulse.*

3. *Fetal Heart Rate* (F.H.R.) should be recorded at each observation.

4. *Electronic Fetal Monitoring* (E.F.M.) utilized? Indicate by "E" for external monitoring (Doppler or Abdominal ECG) or "I" for internal monitoring by scalp electrode.

5. *Contractions* should be assessed at each observation both for frequency and for their quality.

6. Each *vaginal examination* should be recorded.

7. *Observations and Procedures* should be noted briefly. If additional space is required, indicate by "X" in the last column and explain further on the standard Progress Record.

8. *Drugs and Fluids* administered should be recorded on the flow record.

9. The *initials* of each provider, whether physician or nurse, should be recorded. Place full signature and title in space provided.

10. "X" if additional comments are made on the Progress Record.

D. *Delivery Summary*

The format of the Delivery Summary is essentially unchanged from that in current use except:

1. The *birthweight* of the baby is to be recorded in grams.

2. The *length* of the baby is to be recorded in centimeters (CMS).

3. An assessment of the *newborn's maturity* is to be recorded. Example, a baby who appears small for gestational age should be indicated as "SGA".

4. Summary of the *fetal heart rate pattern* encountered during the labor is to be recorded.

5. Space is provided for the signature of the Delivery Room Nurse as well as that of the clinician attending the delivery.