

# LOCAL OPERATING PROCEDURE - CLINICAL

Approved Quality & Patient Safety Committee 21/11/19
Review November 2024

# WATER IMMERSION FOR BIRTH

This LOP is developed to guide clinical practice at the Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this LOP.

### 1. AIM

 To provide woman and staff with appropriate equipment, support and knowledge about labour and birth in water

#### 2. PATIENT

- Woman in labour at term with the following criteria:
  - o Category A as outlined in ACM guidelines antenatal and intrapartum
  - Singleton pregnancy
  - o 37-42 weeks gestation
  - o Cephalic presentation
  - Stable maternal observations 'green' zone in standard maternity observation chart (SMOC)
  - Normal fetal parameters
  - o Booking BMI <35

#### 3. STAFF

· Medical and midwifery staff

## 4. EQUIPMENT

- Birth pool or appropriate sized bath
- Sieve
- Mirror
- Light/torch
- Gauntlet gloves
- Doppler (waterproof)
- Bath net/sling

## 5. CLINICAL PRACTICE

- Discuss antenatally with woman use of water during labour and birth
- Assess woman's suitability based on the above criteria
- Ensure woman is aware of circumstances when she is no longer suitable for a water birth
- Ensure water birth is supervised by midwife experienced with water birth
- Attend routine maternal and fetal observations and record on SMOC.
- Adjust water temperature according to maternal comfort
- Ensure adequate hydration and regular voiding
- Avoid:
  - o soaps and oils in water
  - o bath if within 3 hours of having narcotics
  - o use of Transcutaneous Electrical Nerve Stimulation (TENS) machine in water
- Ensure neonate is born fully submerged and gently brought to the surface within 10 seconds
- Continue birth out of the water if the birthed head is already exposed to air. Do not resubmerge
- Maintain skin to skin contact with woman and keep neonate warm with blankets and bonnet with the body submerged. Head must remain above water post birth.
- Recommend exiting the pool for third stage management as blood loss is difficult to estimate
  in water

# Royal HOSPITAL FOR WOMEN

# LOCAL OPERATING PROCEDURE - CLINICAL

Approved Quality & Patient Safety Committee 21/11/19
Review November 2024

# WATER IMMERSION FOR BIRTH cont'd

- Recommend woman leaves pool if concern for her or her neonate's condition postpartum
- Use bath sling if woman is unable to exit bath herself. Bath sling is located in draw next to bath in Birth Centre or birth pool trolley in Delivery Suite
- Do not empty bath as it is easier to get the woman out if bath remains full. This requires a minimum of four staff using the slings

## 6. DOCUMENTATION

Medical record

## 7. EDUCATIONAL NOTES

- Women reported increased satisfaction of second stage when using water immersion<sup>1</sup>
- Cochrane review 2018 found no evidence that labouring in water increases the risk of an adverse outcome for women or their newborns. The trials varied in quality and further research is needed.<sup>2</sup>
- Neonates born in water to Group B Streptococcus (GBS) positive mothers are less frequently colonised with GBS than those born on land<sup>4</sup>

## 8. RELATED POLICIES / PROCEDURES / CLINICAL PRACTICE LOP

**ACM Guidelines** 

## 9. RISK RATING

Low

# 10. NATIONAL STANDARD

Standard 5 – Comprehensive Care

## 11. REFERENCES

- Pairman S, Pincombe J, Thorogood C, and Tracy S. Midwifery; Preparation for Practice 2015 Churchill Livingstone. Sydney
- 2. Cluett E, Burns E, (2018) Immersion in water in labour and birth (Review), Cochrane Database of Systematic Reviews <a href="https://www.cochrane.org/CD000111/PREG\_immersion-water-labour-and-birth">https://www.cochrane.org/CD000111/PREG\_immersion-water-labour-and-birth</a>
- 3. RANZCOG statement July 2017. Warm water immersion during labour and birth. (C-Obs-24) <a href="https://ranzcog.edu.au/RANZCOG\_SITE/media/RANZCOG-MEDIA/Women%27s%20Health/Statement%20and%20guidelines/Clinical-Obstetrics/Warmwater-immersion-during-labour-and-birth-(C-Obs-24)-Review-July-2017.pdf?ext=.pdf</a>
- 4. Zanetti-Dällenbach R et al 2007. Neonatal colonization-rate with group B streptococcus is lower in neonates born underwater than after conventional vaginal delivery, Geburtsh Frauenheilk 2007; 67: 1114–1119 https://www.researchgate.net/publication/245711912 Neonatal Colonization-

Rate\_with\_Group\_B\_Streptococcus\_is\_Lower\_in\_Neonates\_Born\_Underwater\_than\_after\_C\_onventional\_Vaginal\_Delivery/link/568f8c6f08aeaa1481b2427c/download

# **REVISION & APPROVAL HISTORY**

Title changed from *Waterbirth and Labour in Water* – reviewed and endorsed Maternity Services LOPs group 5/11/19

Approved Quality & Patient Safety Committee 15/4/11

Reviewed February 2011 and renamed Waterbirth and Labour in Water

Labour and Birth in Water approved Quality Council 20/9/04

FOR REVIEW: NOVEMBER 2024