



OB / GYN EMERGENCIES



Escambia County, Florida - ALS/BLS Medical Protocol

The paramedic and EMT should use these protocols to guide him/her through the treatment of patients that are pregnant.

These protocols cover complications of pregnancy and normal and abnormal labor delivery. In addition to these protocols, the paramedic may need to refer to additional protocols (e.g. seizures, etc.).

The assessment of these patients should follow the normal approach to patient assessment as well as specific questions related to the history of the pregnancy.

Questions for pregnancy history include:

1. Number of previous pregnancies (termed Gravida).
2. Number of previous live births (termed Para).
3. Expected date of delivery or due date (termed EDC "estimated date of confinement").
4. When did contractions begin?
5. Any history of labor complications?
 - a. Premature births?
 - b. C-section?
 - c. Multiple births?
6. What is the duration and frequency of contractions?
 - a. **Duration** is timed from the time the contraction starts to the time the contraction stops (e.g. 45 seconds, 1 minute, etc.).
 - b. **Frequency** is timed from the beginning of one contraction to the beginning of the next contraction (e.g. 2 minutes apart, 4 minutes apart, etc.).
7. Evidence of blood show or spotting?



Approved: 10/01/2011
Version: 3.1

Page 1 of 2

Approved by:


Charles Neal, D.O. Medical Director



OB / GYN EMERGENCIES



Escambia County, Florida - ALS/BLS Medical Protocol

8. Did the water break?
 - a. When?
 - b. What was the color? (e.g. clear, greenish, brownish).
 - c. Did it have an unusual odor?
9. Does the patient have an urge to push?
10. Does the patient feel like she has to move her bowels?

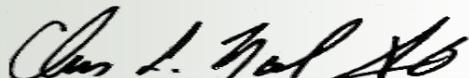
If the patient is complaining of uterine contractions, an external visual examination for crowning should be done to determine if the delivery is imminent.



Approved: 10/01/2011
Version: 3.1

Page 2 of 2

Approved by:


Charles Neal, D.O. Medical Director