Women at CB Dunbar Hospital with changes in FHR and Apgar >6 at 5 minutes. n = 144

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days		Type of BA
14	19	6 and 9	9c no change then FHR found to be 95-100bpm by mother, FH was repeated by midwife and confirmed low, 95- 98bpm,	Left literal tilt position and Doctor on call was also informed. Patient was reviewed and decision to section patient was taken for fetal distress plus prolonged labour CS	NRFS, Prolonged labour	Yes	No	Yes	No	Mild BA
22	14	7 and 10	10c no change then On 11th contraction noted slow heart rate midwife was contacted but she found the heart rate was 153.	the obstetric clinician was contacted. Mother's membranes were ruptured and vacuum delivery undertaken	There was no meconium	No		No	No	No BA
29	17	8 and 10	14c no change Midwife noted FHR 118 and informed obstetric clinician. repeat fetal heart rate 105 put patient in lateral tilt and informed Dr who reviewed patient and found fetal heart rates 110 105 108	LLT and Emergency CS was performed	Meconium. NRFS	No	No	No	No	No BA
34	22	6 and 9	bradycardia midwife	LLT and called Obstetric clinician Grade 3 Meconium was present obstetric clinician found FHR 110 cervix fully dilated vacuum delivery	Grade 3 <mark>meconium.</mark> Vacuum	Yes	?	Yes	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	admit Yes/No	Seizures or fits in NICU	Type of BA
39	22	5 and 7	13c then confirmed - by midwife 95-100 b/m on two different occasions	CS	NRFS	No		Yes	No	BA
116	28	6 and 10	13c no changes then Yes FHT 102, CO weakness Call for help. Obs Clin contacted IV line 500ml RL	VD	No meconium 4.2 Kg BWt	Yes	5	Yes Nasal CPAP Infection	No	Mild BA
119	16	5 and 10	the 14th contraction she call the midwife because the fetal heart rate was low the midwife	The obstetric clinician was contacted she opened IV line and gave R/L 1000 mL informed the doctor on call the doctor came and assessed the patient and said we should prepare patient for caesarean section CS	Meconium. 4Kg	Yes	7	Yes 8 days	No	Mild BA
122	15	7 and 10	6c no changes then Fetal bradycardia detected by Mum 105 bpm. Midwife called and checked and confirmed 105	Ob Clin called Arranged fast delivery as 9cm cervix dilated. VD	Meconium Grade 3. 1.93Kg SGA	Yes	2	Yes	No	Mild BA
138	28	5 and 8	5c no changes then 108bpm MW confirmed	NS 500ml at flow rate OBC contacted VD followed	Meconium.	Yes	?	Yes	No	Mild BA
144	32	6 and 8	2c both abnormal and 190 midwife called for help and confirmed rapid heart rate.,	N/S 500ml set up, Dr called, vacuum delivery was done		Yes	1	Yes	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
149	17	6 and 7,	5c no changes then mother detected slowing. MW confirmed fall in FHR to 109 R/L	500mls IVF was put up at flow rate D 50% 30CC served. OBC contacted and quickly delivered the baby VD	Meconium	No	No	No	No	BA
151	NR	7 and 10	26c no changes then Mother detected slowing and MW confirmed 109 bpm.	Open IV line with 18g R/L 500mls to run at flow rate. Dr on call contacted, pt prepared for surgery CS	Grade 2 meconium	Yes	2	Yes Minor Birth asphyxia	No	Mild BA
160	16	9 and 10	6c no changes detected then mother detected fast FHR and MW confirmed: 167 bpm	Normal saline 500mls put up and Dr on call informed. CS performed.	Patient fully dilated Obstructed labor, 3+ caput	No	No	Yes waiting for Mum to recover from CS	No	No BA
163	NR	6 and 8	6c no changes then mother noted a slow FHR MW confirmed 102 bpm	N/S 500mls set up, present, cord prolapse identified, inform OB clinician, knee chest position, N/S 300mls inserted into bladder to avoid compression, CS performed	meconium present, cord prolapse identified 30 weeks gestation B Wt 1.7Kg	Yes Bag and mask	1-3	Yes. 14days	No	Went home after 14 days Mild BA
168	NR	7 and 8	11c no changes then mother reported slowing but MW found 124 bpm. Then FHR fell to 119 bpm	Call OB clinician and Dr on call. Set up R/L 500 ml CS done	grade 3 thick <mark>meconium</mark> Previous CS x1. 2.4Kg	No		Yes for sepsis Foul meconium	No	Mild BA
179	32	Good maternal	7c no changes then mother noted a slowing of FHR Midwife contacted and found 110bpm	Patient put in left lateral position, obstetric clinician informed. Repeat FHT 112, cx fully dilated, patient taken to	Post date meconium present,	Yes	5	Yes Abiotic	No	BA

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
				delivery table for quick delivery. Was ready with vacuum but born VD within 5 mins. Baby had v short cord.						
226	31	8 and 9	29c no changes then mother noted at 30th contraction a slow FHR MW confirmed- 118b	Midwife informed the obstetric clinician and set up R/L 500ml. With respect to FHR, intern Dr on call ordered repeat and was done (106b/m). Discussion for CS was undertaken but no CS materials so patient was referred to Phebe hospital at 7:05am. Cx still 4cm dilated. Descent 3 / 5 CS at Phebe Hospital		No resus needed after CS at Phebe hospital		Yes. 7days	No	No BA
262	19	5 and 7	38c no changes then Mother noted FHR slowing on 39th contraction No meconium MW and OC confirmed FHR 115, 118,122	IV N saline 500ml plus D50% 30ml Cervix 10cm Obs clin did vacuum with Dr present but failed 3 times Dr and Obs clin immediate CS	Intra-op Meconium CPD	Yes	5mins	Mild birth asphyxia Yes. 5days	No	BA
263	22	8 and 10	50c no changes then mother noted slowing on 51st contraction MW	Meconium was present Notified obs clin IV fluids, 50% dextrose	meconium	No		Yes. 3days	No	No BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
			recorded FH 109, 178,120,110,181,102,13 0	30ml, called dr and senior obs clin to review Due to FHR changes, high station O and bad obstetric history G4P0 CS done						
344	30	8 and 10	47c no changes then 110 b/m and 115 b/m OC confirms fetal distress 110/bm.	Put in left lateral position, inform obstetric clinician. Opened 2nd IV line and 18G cannulae normal saline 1L and flow rate, inform Dr and OR team, patient quickly council and prepare for CS. CS done	Grade 1 meconium. Prolonged labour	No		Yes?? NR	No	No BA
359	29	9 and 10	Yes-from first contraction FHR was 195 then the FHR was slow for the subsequent 12 contractions (115; 110; 108; 115; 108; 115; 110; 108; 105; 119; 110; 118)	Could not be taken to OR immediately due to lack of IV fluid, and another patient in OR undergoing CS, No abiotic for preop available CS done	No meconium	No		No	No	No BA
360	42	6 and 9	21 c no changes then at 22nd contraction 119; 118; 120	Oxygen LLT, D50 Emergency CS at 8cm		Yes	9mins	Yes. 4days	No	Mild BA
363	29	5 and 9	12c no change then Yes- 110; 115; 119	Expedited delivery BY VACUUM	Fully dilated Bradys	Yes	6mins	Yes	No	Mild BA
378	18	6 and 8	40c no changes then at 41st contraction FHR 120; 119; 116; 119;117; 118 SEE COMMENT	IVF, OXYGEN, LLT CS		Yes	8mins	Mild BA Yes. 10days	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
399	22	8 and 10	MW was monitoring MUM refused and at 14th contraction FHR – see comments 114-119 bpm	IVF, OXYGEN , LLT, D50 CS	Not fully dilated	No		No	No	No BA
406	20	8 and 10	11c Mother reported change but FHR confirmed as normal range by MW	However was given IVF, LLT, oxygen and said to improve -129; 129; 122; 120; 126 VD	Meconium was however present	No		No	No	No BA
415	21	8 and 10	Within normal range but at 25th contraction, FHR recorded at 122 and 120 Mum considered a change	Patient put in left lateral tilt position and encouraged to ambulate. At 49th contraction FHR 130; 129; 132 VD		No		No	No	No BA
422	26	7 and 10	21c no changes then at 18th contraction 117.Then at 22c contraction FHR 116.	Patient put on her left side and encouraged to ambulate. R/L 500ml set up. OB Clin fluctuating FHR At 22nd oxygen set up @ 5L/m Amp 2g stat Vacuum	Meconium and poor maternal efforts	No		Yes	No	No BA
427	18	4 and 7	Yes-from first contraction-118; 113; 114; 116; 100; 112; 108	Bladder empty, LLT, IVF, Oxygen VD		Yes	3mins	Yes 10 days sepsis	No	BA
437	20	3 and 7	4c no changes then at 5th contraction 121; 117; 113; 107; 116	IVF, LLT, oxygen CS	Previous CS x1 prolonged active phase labour	Yes BM and CC	10mins	Yes	No	BA

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
439	21	8 and 10	at 14th contraction FHR 120 and patient put on left side and oral fluid intake. FHR increased to 129	VD		No		No	No	No BA
442	19	8 and 10	11th Contraction 115,	Put patient in left lateral position. Oxygen. N/S 1 L at full rate. Dr informed. Taken to OR for CS		No		No	No	No BA
455	22	8 and 10	29c no changes then Yes at 30th contraction 166 then 157	Obs clin contacted Vacuum	Poor maternal efforts	No		Yes	No	No BA
469	29	8 and 10	29c no changes then at 30th contraction FHR 113 then 111	IVF, LLT, oxygen CS for fetal distress by obs clin		No		No	No	No BA
489	24	6 and 10	32c no changes then at 33rd contraction FHR 90.	Obs clin LLT, oxygen, IVF and CS		no	no	Yes	No	No BA
556	25	7 and 10	26c no changes then at contraction 27=109bpm	Patient place in left lateral tilt position, discontinued oxytocin drip put patient on oxygen, and patient prepare for CS done by ob clinician	Meconium	No		No	No	No BA

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
560	22	7 and 8	19c no change then 20c 109bpm	ob clinician informed patient put in lt lateral position oxygen 51/minstat patient vie cx 6cm counsel and prepare for CS by ob clinician		No		Yes	No	Mild BA
601	31	8 and 10	38c no change then Yes 39 – 172bpm 40 – 180bpm 41 – 176 bpm 42 – 170bpm 43 – 179bpm 44 – 182bpm 45 – 106bpm	Place pt in leftt lateral position give oxygen 5l/min stat, piv-cx 6cm n/s i.5 liv counsel, prepare for CS done by ob clinician		No		No	No	No BA
684	19	8 and 10	27c no changes then contraction 28 - 110bpm,	patient placed in left lateral position oxygen at 5l stat, fhr repeated 105bpm, plu cx 8cm dilated, patient counsel and prepared for CS done by ob clinician. 2 ND IV LINE 5 MIN READINGS UNTIL CS Pain control see form		No		No	No	No BA
686	35	7 and 10	29c no changes then contraction 30 - 105bpm Ob clinician order that fhr to be monitored every 5 mins after a contraction until patient is taken to a OR.	Patient placed in left lateral position oxygen at 5l stat, n/s 1l IV flow rate plu - cx 7cm dilated, patient counsel and taken for surgery CS done by ob clinician	Grade 1 meconium	No		No	No	No BA

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	admit Yes/No	Seizures or fits in NICU	Type of BA
854	20	8-10	23c no changes then 24th contraction 113bpm.	Patient placed in left lateral position. oxygen given. Counselled for CS		No		No		No BA
855	20	4-7	26c no changes Then 27th contraction 110bpm	Prepared for vacuum delivery	Occurred 2 nd stage Prolonged Stage 1 <mark>meconium</mark> OB Clin Vacuum	Yes	5mins	NR	No	BA
906	20	5-7	23c no changes then on 24th contraction 115bpm. Repeat FHT 110bpm.	Placed in left lateral position, place on Oxygen and prepare for C/S	Cervix 9 cm +1 OB clin	Yes	4mins	Yes	No	BA
908	22	6-8	25c no changes then 26th contraction 113bpm.	Episiotomy done VD		Yes	6mins	Yes	No	Mild BA
910	25	5-8	27c no changes then 28th contraction 110bpm.	Placed in left lateral position. I2 N/S. FHT 105bpm. prepped for C/S	8 cm dilated	Yes	3mins	Yes	No	Mild BA
911	22	6-8	25 no changes then 115bpm by OC.	Episiotomy then difficult vaginal delivery VD		Yes	2mins	Yes	No	Mild BA
	31		23c no changes then	Patient placed in left lateral position oxygen	Grade 1 Meconium Cx 3cm Ob clin Good maternal comment: I feel very fine during the monitoring of my baby heartbeat because the midwife teach me about the normal and abnormal heartbeat and I just want to tell you mighty God thank you for all the midwives in				No	No BA
1066		8-10	24th contraction 109bpm.	and prepared for C/S	our country and thank God I was able to know when my	No		Yes. 5days		

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
					baby was not breathing fine the midwife and the doctors then helped to save my baby. I am very happy for my baby.					
1147	19	5-8	23c no changes then 24th contraction 110bpm	Cx fully dilated. patient taken to delivery table for vacuum delivery		Yes	5mins	Yes. 7days	No	Mild BA
1198	17	5-7	32c no changes then 33rd contraction 102bpm.	NS 500ml and D50% oxygen given placed in left lateral position. 2 nd IV line prepared for C/S	Meconium	Yes	5mins	Yes. 11days	No	BA
1199	22	6-8	16c no changes Then 17th contraction 108bpm.	patient taken to delivery bed for fast delivery by vacuum		Yes	2mins	Yes Mild BA and risk sepsis	No	Mild BA
1200	20	6-8	13c Missing form? FHR value??	Yes. patient placed in left lateral position. Fully dilated taken to delivery table for fast vacuum delivery		Yes	3mins	Yes. 7day	No	Mild BA
1249	38	6-8	37c no changes then	38th contraction 115bpm. patient fully dilated taken to delivery table for fast delivery VD		No		Yes	No	Mild BA
1250	18	6-8	35c no changes then 36th contraction 111bpm.	taken to delivery table for fast delivery VD	Fully dilated	No		Yes	No	Mild BA
1267	24	6-8	32c no changes then 33rd contraction 110bpm	. NS 500ml set up D50% . Fully dilated Quick delivery VD		Yes	3mins	Yes	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
1301	30	7-8	24c no changes then 25th contraction 115bpm.	part of baby head showing. Episiotomy done to delivery baby quickly VD		Yes	3mins	Yes	No	Mild BA
1327	17	5-8	19c no changes then 20th contraction 85,101,112 bpm	NS 500ml & oxygen set up. patient placed in left lateral position. prepared for CS		Yes	3mins	Yes	No	Mild BA
1328	20	6-9	26c no changes then changes 10 X noticed from 27th contraction	Prepared for CS		Yes	4mins	Yes	No	Mild BA
1332	20	7-10	29c no changes then 30th contraction 110bpm.	placed in left lateral position O2 started NS 500ml. prepared for CS		No		No		
1376	25	5-7	32c no changes then 33rd contraction 110 bpm.	NS 500ml & D50% set up. Episiotomy. Patient taken for quick delivery VD		Yes	3mins	Yes	No	BA
1379	27	6-8	30c no changes then 31st contraction 110bpm	D50% & NS 500ml set up and quick delivery done VD	By OBC	Yes	8mins	Yes	No	Mild BA
1382	29	5-7	26c no change then27th contraction 108bpm	.NS 500ml D50% & quick VD	By OBC fully dilated	Yes	10mins	Yes	No	BA
1460	17	7-9	31c no change then 32nd contraction 100bpm.	D50% and NS 500ml set up. OBC ordered vacuum delivery		No		Yes	No	
1493	17	7-8	28c no change then 29th contraction 100bpm	NS 500ml & D50% set up. O2 therapy. Quick vacuum delivery	OBC	No		Yes	No	
1494	29	4-8	24c no change then 25th contraction 114bpm.	NS 500ml & D50% set up. O2 therapy. Prepared for CS by OBC		Yes	3mins	Yes	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
1522	21	5-8	32c no change then 33rd contraction 108bpm.	NS 500ml & D50% set up. O2 therapy. Prepared for CS		Yes	3mins	Yes Needed O2 BA	No	Mild BA
1546	18	5-8	35c no change then on 36th contraction X MARKED.	cs	NRFS. Obstructed labour	<mark>Yes</mark>	2mins	Yes	No	Mild BA
1554	23	8-10	30c no change then 31st contraction FHR change noted. Prepared for CS X MARKED	cs		No		No		No BA
1576	28	8-10	35c no change then 36th contraction 105bpm. XMARKED	Placed in left lateral position. O2. prepared for CS		No		No		No BA
1580	20	4-7	33c no change then 34th contraction 100bpm.	D50% NS500 ml set up O2 therapy. patient 10cm dilated. quick delivery ordered VD		Yes	5mins	Yes. FOR BA 5mins	No	BA
1581	20	5-8	32c no change then 33rd contraction 100bpm.	D50% NS500 ml set up O2 therapy. patient 10cm dilated. quick delivery ordered VD		Yes	5mins	Yes. Mild BA 2mins	No	Mild BA
1584	20	6-7	32c no change then 33rd contraction 100bpm.	D50% NS500 ml set up O2 therapy. patient 10cm dilated. quick delivery ordered VD		Yes	2mins	Yes. 3mins	No	BA
1585	18	5-8	33c no change then 34th contraction 103bpm.	Patient placed in left lateral position NS 1000ml set up. O2 given. prepared for CS		Yes	4mins	Yes. 4days	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
1613	33	7-10	33c no change then 34th contraction 175bpm.	placed in left lateral position NS500 ml set up O2. prepared for CS	OBC	No		Yes for close monitoring	No	No BA
1616	19	5-7	29c no change then 30th contraction 110bpm.	NS 500ml set up. fully dilated. taken to delivery table for quick delivery. Episiotomy VD		Yes	2min	3 days	No	BA
1618	22	5-8	33c no change then 34th contraction 113bpm.	fully dilated. taken to delivery table for quick delivery OBC VD		Yes	6mins	Yes mild BA	No	Mild BA
1630	19	8-10	32c no change then 33rd contraction change noted. caesarean-NRFS MARKED WITH X	CS	NRFS	No		No		
1636	23	4-7	Yes-1st contraction 180bpm	Already in 2nd stage of labour and fully dilated. O2 & NS 500ml set up. Urinary cath Episiotomy VD		Yes	7mins	Yes	No	BA
1667	20	9-10	30c no change then 31st contraction FHR change noted. MARKED WITH X	cs		No		No		
1679	35	4-7	32c no change then 33r contraction 100bpm.	NS 500ml & D50% set up O2 therapy started. OBC ordered quick delivery VD		Yes	5mins	Yes BA	No	BA
1680	17	5-8	18c no change then 19th contraction 120bpm	ceftrixone 2g IV set up. active phase of labour began. NS500ml Pitocin VD	offensive meconium.	Yes	1min	Mild BA Yes	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
1704	21	8-10	18c no change then 19th contraction 171bpm.	NS 500ml set up D50%. O2 therapy. prepared for CS	OBC	No		No		
1752	23	2-7	38c no change then Yes 105 bpm	VD	Breech	Yes		Yes		BA
1753	21	7-7	33c no change then 34th contraction 105bpm and 106 bpm.	Patient placed in left lateral position. O2. NS 500ml. prepared for C- section	Obstructed labour	No		Mild BA Yes	No	BA
1760	NR	9-10	17c no change then 18th contraction 185bpm. She was taken to the ultrasound to confirm the reading from the moyo and the sonorine (Dopper) and it was 163bpm.	OBC informed and he said since she's not in active phase pf labour. Patient was immediately place on O2 & D50% set up. Patient prepared for C-section.		No		No	No	No BA
1771	36	8-10 / 8- 10	Non reassuring FHT.	OBC reassessed patient. Multiple gestation. Pre- eclampsia and non reassuring FHT. CS	NRFS. Multiple gestation. Pre eclampsia.	No		No		No BA
1776	22	5-7	21c no change then 22nd contraction 112bpm.	D50% OBC order quick delivery VD		Yes	7mins	Yes	No	BA
1786	19	5-7	18c no change then 135 bpm /116 bpm from 19th contraction.	N/S 500 ml set up at flow rate, D50% 40cc served. OBC assessed and orders quick vaginal delivery. VD		Yes	3mins	Yes Mild BA	No	BA
1787	33	5-8	33c no change then 138 bpm, 128 bpm, 114 bpm from 34th contraction.	Yes- We were already preparing this patient for C/S when the FHT started dropping and		Yes	2mins	Mild BA Yes	No	Mild BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	admit Yes/No	Seizures or fits in NICU	Type of BA
				immediately she was rushed for CS						
1916	36	8-10	First contraction 121 bpm - 26th contraction. 141 bpm: Active phase of labour begin at 3:00 pm. - 31st contraction 165 bpm	N/S 500 ml set up at flow rate, D50% was not served because patient said she was diagnosed as Diabetes before. O2 therapy initiated at high flow. OBC reassessed patient and ordered that be prepared for C - Section .	Diabetes.	No		No	No	No BA
1924	16	5-8	24c no changes then 25th contraction 110 bpm	. Pitocin drip was D/C. N/S 500 ml at flow rate FHT repeated-112 bpm O2 at 5 L. Patient placed in left lateral position, P/V done cervix 7 cm dilated membrane absent. OSB 30 cc served IV. Patient was quickly preparing for CS		Yes	1mins	Yes	No	Mild BA
1937	26	8-10	13c no changes then from 14th contraction 112 bpm. OBC reassessed FHR=110 bpm	patient placed in left lateral position, 500 ml of N/S set up at flow rate, O2 therapy established, D50% 40cc served IV CS	Previous CS x2	No		No	No	No BA
1958	18	9-10	39c 80pm via the moyo and it was repeated on	OBC quickly informed. N/S 500 ml. set up at flow rate, D50% cc was		No		No	No	No BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
			ultrasound and FHR-then 106 bpm	served. O2 therapy initiated at high flow. OBC ordered that pt be quickly prepared for CS						
1979	19	8-10	14c no changes then 106 bpm from 15th contraction	N/S 500 ml was set up @ flow rate, D50% 30cc iv push served, O2 therapy initiated @ high flow. OBC informed and reassessed patient. Patient was fully dilated and ordered quick vaginal delivery. VD		No		No	No	No BA
2120	24	8-10	Yes- from first contraction 100 bpm. Patient was admitted with FHR of 100 bpm,	Doctor informed came, reassessed patient and ordered that Pt be placed on O2 and prepared for C/S .		No		No	No	No BA
2180	35	9-10	29c no changes then 110 bpm, 105 bpm.	Yes- Placed in left lateral position, O2 at 5L. N/S 500ml at flow rate, OBC informed. CS by OBC		No		No	No	No BA
2301	16	4-8	1c 171 bpm.	Pt came fully dilated from the ER and was referred from Totota Clinic. VD		Yes	3mins	Yes	No	Mild BA
2303	18	5-8	179 bpm. Patient was Dx of malaria In pregnancy with 2nd Quinine protocol just ending at the ER	Dr assessed patient and order that she be prepare for C/S. She was placed in left lateral position, O2 5L/min start after monitoring about 3 hour delay for surgical		Yes	3mins	Yes	No	Mild BA

Patient no.	Maternal age yrs		Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
				materials to allow patient to deliver. VD						
2306	19	5-7	20c no changes then from 21st contraction=100bpm. OBC reassess. FHT-101 bpm	Patient was placed in left lateral position, D50% 40cc served iv, O2 therapy 51/minestablished, N/S 500ml set up at flow rate. Plu-cx fully dilated, pt taken to del. table for quick delivery Vacuum		Yes	5mins	Yes	No	BA
2400	18	1st= 0-0 2nd= 8- 10	Yes- from 1st contraction = 160bpm/138bpm from 19th contraction=100bpm.	clinic for multiple gestation. Patient was placed in left lateral position. 30cc of D50% iv served, N/S 500ml iv set	Multiple gestation.	No		Yes. 4days sepsis only	No	1st twin DIED Few mins
2435	25	7-10	26c no changes then From 27th contraction = 114 bpm.	Patient placed in left lateral position, O2 at 5L/min N/S 1L at flow rate, p/v cx 6cm dilated CS was order.		No		No	No	No BA
2486	21	4-8	28c no changes then 29th contraction 110bpm.	OBC informed and reassured and patient prepared for CS		Yes	5mins	BA Yes	No	Mild BA
2488	27	8-10	1st contraction 160bpm.	OBC reassess patient and order patient be prepared for emergency CS .	Arrest of descent ? Macrosomia BWT 3.4KG	No		No	No	No BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
2493	17	4-7	29c no changes then 30th contraction 100bpm. OBC reassessed patient FHR 104bpm.	Patient laid on her left side. NS 500ml O2 therapy VD		Yes	10mins	BA and sepsis Yes	No	BA
2495	30	3-10	46 c normal but during delivery 2 nd stage on delivery bed FHR 95bpm	VD	Delivery complicated by three cord entanglements	Yes BM	Over 30 min	Yes	No	BA
2496	29	5-7	24c no changes then 25th contraction 105bpm. Dr reassess FHR 102bpm.	NS500ml. Left lateral. D50% O2 therapy Quick delivery VD		Yes	3mins	BA and risk of sepsis	No	BA
2497	22	5-8	28c no changes then 29th contraction 108bpm. Dr reassess FHR 106bpm	NS500ml. Left lateral. D50%. CX 10cm. taken to delivery table for quick delivery VD		Yes	1mins	Yes	No	Mild BA
2498	19	3-8	28c no changes then 29th contraction 109bpm. Dr reassess FHR 106bpm.	NS500ml. Left lateral. D50%. CX 10cm. taken to delivery table for quick delivery VD		Yes	4mins	BA Yes	No	Mild BA
2499	20	6-8	1st contraction 178bpm.	referral from Karyata clinic with NRFS CS		Yes	5mins	BA Yes	No	Mild BA
2501	19	5-8	30c no changes then 31st contraction 106bpm. Dr reassess FHR 102bpm	left lateral NS500ml D50% O2 therapy CX 10cm patient taken to delivery table for quick delivery VD		Yes	2mins	Yes SEPSIS	No`	Mild BA
2547	28	9-10	30c no changes then 31st contraction 115bpm.	OBC assess patient and order patient be taken to OR for C/S		No		No		

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	· /	admit Yes/No	Seizures or fits in NICU	Type of BA
2647	19	4-7	34c no changes then 35th contraction 102bpm. Dr, reassessed FHR-100bpm,	Patient was encouraged to lie down on her left side, NS 500ml IV set at flow rate, D50%-40ml IV was served and O2 therapy 5//min was connected CS		Yes	4mins	Yes BA Risk of sepsis	No	BA
2673	18	9-10	1st contraction 100bpm.	Patient was placed in a left lateral position, O2 51/ min started, NS put at flow rate and patient was prepared for C/S	Prolonged labour	No		No	No	No BA
2683	18	4 and 8	37c no changes then 38 cons normal then on delivery table OBC found FHR 115	Initiated IVF and quick delivery VD	2.6Kg	Yes BM	10 mins	Yes 6 days	no	Mild BA
2733	29	4-8	17c no changes then 18th contraction 106bpm. OBC reassessed FHR- 102bpm,	Pt was told to lie on her left side, NS 500ml IV setup at flow rate, 30cc of D50% IV served, O2 therapy 51/min was established. CS	Fail to progress	Yes	3mins	Yes BA risk sepsis	No	Mild BA
2779	23	6-10	9c no changes then 10th contraction 108bpm.	Patient was placed on the left side, NS 500ml was established after reassessing FHR- 103bpm, D50% (30cc) IV & O2 therapy 5l/minwas established. CS		No		Risk sepsis Yes	No	NO BA
2785	33	9-10	33c no changes then 34th contract 118bpm.	Patient was placed on the left hand & NS 500ml	2kg Bwt	No		No	No	No BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
			OBC reassessed FHR (118bpm),	was set up at flow rate. CS						
2793	16	8-10	28c no changes then 29th Contraction 115bpm.	Patient was placed in left lateral position, O2 at 5L/min attached and NS 1L served at flow rate CS		No		No	No	No BA
2796	20	5-8	24c no changes then 25th Contraction 168bpm. Dr reassess 172 bpm	Patient was placed on her left side, NS 500ml was served & O2 therapy 51/min was established. CS	Fail to progress Preeclampsia	Yes	3mins	Mild BA Yes	No	Mild BA
2810	22	8-10	27c no changes then 28th contraction 119bpm. Dr. reassessed FHR-114bpm,	Pt. was laid on her left side & NS 500ml was set up at flow rate. CS	2.3Kg	No		No	No	No BA
2925	31	7-10	41c no changes then 42nd contraction 168bpm. OBC reassessed FHR-169bpm	NS 500ml IV setup at flow rate, O2 therapy 5l/min was established & Patient was placed on the left side VD		No		Yes risk sepsis	No	No BA
2926	36	8-10	1st contraction 118bpm. Dr reassess 114bpm	Patient was placed on the left side, D50% 30cc IV served & NS 500ml was setup. VD	Fully dilated	No		No		No BA
2929	18	6-9	1	Dr assessed and patient taken to ER for surgery. CS	Referred from clinic and seen in ER Prolonged labour and malaria What was FHR in admission?	Yes	2mins	Yes mild BA	No	Mild BA
2932	18	3-7	38c no changes then 39th contraction 112bpm. OBC reassessed FHR-110b/m,	placed patient on the left side, NS-500ml IV set up @ flow rate, D50%-30cc IV served and patient was taken to the delivery		Yes	6mins	Yes severe BA	No	BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
				table for quick delivery VD						
2935	38	2-8	35c no changes then 36th contraction 115bpm.	Patient was placed on the left lateral position. OBC came and reassessed, took her to the delivery table and a difficult vaginal delivery was done. VD	3.5kg BWT	Yes	8mins	Yes Severe BA	No	Mild BA
3002	21	9-10 & 9- 10	1st contraction 120bpm	NS 500ml was set up IV at flow rate TWINS VD	Twins 2.4Kg and 2.4Kg	No		No	No	No BA
3036	20	4-8	5th contraction 101bpm. OBC reassessed FHR 103bpm,	Pt was placed on on the left side, NS 500ml IV served and O2 therapy 5 l/minestablished and pt was prepared for an emergency CS	Previous CS x2 Obstructed labour	Yes	3mins	Yes Mild BA	No	Mild BA
3041	33	7-10	51c no changes then 52nd contraction 110bpm. OBC reassessed Pt FHR- 113bpm,	She was placed on the left side N/S 500ml IV set up at flow rate, D50%- 30cc IV Served, O2 therapy 5l/min established CS		No		Yes. 3days	No	No BA
3094	33	7-10	30c no changes then 31st contraction 113bpm.	NRFS LLT, IVF, D50 NRFS Then 109bpm CS		No		No	No	No BA
3105	20	8-10	22c no changes then 23rd contraction 115bpm.	OBC reassessed Patient and ordered that patent be prepared for CS	Fetal distress Obstructed labour CPD	No		No		No BA

Patient no.		Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	NICU admit Yes/No If Yes how long?days	Seizures or fits in NICU	Type of BA
3110	28	8-10	1st contraction 100bpm.	Pt was placed on her left side, N/S 500ml was set up at flow rate and O2 therapy 5l/min was established. OBC assessed FHR 106bpm CS	Prolonged latent phase, FHR problem	No		Yes. 3days risk of sepsis	No	No BA
3189	35	9-10	45c no changes then 46th contraction 114bpm. Dr. reassessed FHR-110bpm,	Pt was placed on the left side, NS 500ml IV was set up at flow rate and D50%-30cc was served IV CS		No		No	No	No BA
3241	37	8-10	39c no changes then 40th contraction 115bpm.	OBC reassessed Patient and ordered that the patient be prepared for C/S	2.3Kg	No		Yes. 5days Risk sepsis	No	No BA
3264	37	8-10	1st c 170bpm.	Pt was placed on her left side, NS 500ml + D50%- 40cc was set up at flow rate & O2 therapy 5 l/min was established after OBC reassessed FHR- 178bpm. CS	3 previous CS 2.4Kg	No		No	No	No BA
3320	22	8-10	34c no changes then35th contraction 112bpm.	cs	NRFS. Prolonged 2nd stage.	No		No	No	No BA
3388	24	7-10	1 st c 197 bpm/	Patient came in fully dilated, referred from a local clinic and the patient was rushed in the delivery room from the ER VD		No		No		No BA

Patient	Maternal		Changes FHR	ACTIONS and mode of	Obstetric issues Describe	Baby	Duration		Seizures	Type of
no.	age yrs	scores at 1 and 5 minutes	C =contractions	delivery		resus	resus (min)	admit Yes/No If Yes how long?days	or fits in NICU	BA
3429	18	8-10	45c no changes then 46th contraction 114b/m	NS 500ml was set up, D50% (30cc) was also served & patient was placed on the left side after assessment by Dr. CS undertaken as an emergency	NRFS	No		No		No BA
3462	24	8-10	30c no changes then 31st contraction 110b/m Dr. reassess FHR- 109b/m,	NS 500ml setup at flow rate, O2 therapy 5l/min established, D50%-30cc iv was served and Pt was prepared for C/S	NRFS Emergency CS	No		No		No BA
3463	23	8-10	49c no changes then 50th contraction 112b/m	Patient was placed on her left side with NS 500ml setup after reassessment. CS	NRFS OBC Emergency CS	No		No		No BA
3464	31	9-10	35c no changes then 36th contraction 115b/m OBC assessed FHR- 113b/m,	NS 500ml IV was setup @ flow rate & D50%-40cc IV served. CS	NRFS Emergency CS	No		No		No BA
3465	23	9-10	49c no changes then 50th contraction 110b/m OBC reassessed FHR- 112b/m,	NS 500ml set up at flow rate CS	NRFS Emergency CS	No		No		No BA
3468	28	8-10	36c no changes then 37th contraction 110b/m OBC assessed FHR- 118b/m,	NS 500ml was setup at flow rate, D50%-30cc IV served and Pt was prepared for an emergency CS	NRFS Emergency CS 2.4Kg	No		No		No BA

Patient no.	Maternal age yrs	Apgar scores at 1 and 5 minutes	Changes FHR C =contractions	ACTIONS and mode of delivery	Obstetric issues Describe	Baby resus	Duration resus (min)	admit Yes/No	Seizures or fits in NICU	Type of BA
3470	22		20c no changes then 21st contraction 110- 113b/m	LLT, IVF CS	NRFS & Previous C/S X 1 Emergency CS performed	No		No		No BA
3482	23		46c no changes then 47th contraction 109b/m OBC reassessed FHR- 106b/m,	NsS 500ml IV setup, D50%-30cc IV served & Pt was placed on her left side. CS	NRFS Emergency CS performed	Yes bag and mask	3 mins	Yes BA present	NO	BA
3484	42	3-7	32c no changes then 33 rd contractions 110b/m OBC reassessed FHR- 112b/m,	Pt encouraged to lie down on her left side, NS 1liter setup at flow rate and was prepared for CS	Failure to progress/NRFS Emergency CS performed	Yes bag and mask	9 mins	Yes BA present		BA