

PRETERM LABOR

I. DEFINITION:

The occurrence of regular, continuous uterine contractions between 20 to 37 weeks of gestation, and accompanied by progressive dilation of the cervix.

II. CLINICAL FEATURES:

A. Subjective Information:

1. The client may complain of: uterine contractions; menstrual-like cramps; painless abdominal tightening; lower, dull backache; pelvic pressure; pressure in the back of the thighs; feeling as though the baby is going to “fall out”; intestinal cramps; diarrhea; “gas pains”; increase or change in vaginal discharge; a general feeling that something is not right.
2. Inquire about fetal activity in the last 24 hours.

B. Objective Information:

1. Note client’s general appearance and level of distress, i.e., crying, anxious, clutching abdomen, etc.
2. Observe the duration, interval and character of contractions; observe for loss of blood or fluid from vagina.
3. Check temperature, pulse, fetal heart tones and blood pressure.

III. MANAGEMENT PLAN:

A. Client Education:

1. Assess client’s knowledge of self-monitoring for preterm labor and signs and symptoms requiring medical intervention.
2. Provide client with a copy of Guidelines for Self-Monitoring and Detection of Pre-Term Labor (Appendix 1).

B. Consultation/Referral:

Refer all clients presenting with symptoms of pre-term labor for immediate evaluation by healthcare provider.

C. Follow-up:

1. Inquire at subsequent visits regarding signs and symptoms of preterm labor.
2. Determine tracking priority utilizing professional judgment.

REFERENCES:

- Cibulka, N. J., & Barron, M. L. (2013). *Guidelines for Nurse Practitioners in Ambulatory Obstetric Settings*. New York, NY: Springer Publishing Company, LLC.
- Gabbe, S.G., Niebyl, J.R., Galan, H.L., Jauniaux, E. R. M., Landon, M.B., Simpson, J.L., Driscoll, D.A., (2012). *Obstetrics: Normal and Problem Pregnancies* (6th ed.). Philadelphia, PA: Saunders
- Kriebs, J. M., & Gregory, C. L. (2005). *Varney's pocket midwife* (2nd ed.). Sudbury, MA: Jones and Bartlett.

APPENDIX 1

GUIDELINES FOR SELF-MONITORING AND DETECTION OF PRETERM LABOR

Early detection and recognition of the signs of preterm labor may be the most important link in preventing a premature birth. Because these early warning signs are so subtle and may be difficult to detect, it is important to practice monitoring regularly. This will help you become familiar with your normal uterine activity pattern. Once you know what is normal for you, you will be able to identify what is not normal.

It is important to take time out every day and monitor yourself for uterine contractions. It may not always be possible to lie down, but you can relax in a comfortable position and feel for uterine contractions.

When monitoring for uterine contractions at home, you may do it the following way:

1. Lie down with a pillow behind your back so you are tilted slightly to your left side.
Do not lie flat on your back.
2. Place your hands on each side of your lower abdomen.
3. If you feel your uterus become tight and firm to the touch, you are having a contraction. Using your watch, monitor the length of each contraction as well as the time between each contraction.

When you have a contraction, your uterus will feel firm all over, and not only in one area. You may even see your uterus appear to stand up like a hard ball as the contraction begins, then go down as it goes away.

4. REMEMBER: If you feel your uterus tighten or if you feel any of the warning signs of preterm labor, you need to:

LIE DOWN ON YOUR LEFT SIDE

MONITOR FOR UTERINE CONTRACTIONS

DRINK AT LEAST 1 LITER OF WATER

If after 1 hour, you continue to have 4 contractions or more (per hour), call your OB provider and go to the labor and delivery unit.

5. WHAT IS NORMAL?
 - a) Less than 4 contractions per hour
 - b) Backache as your baby grows and causes your posture to change
 - c) Pressure as your growing baby presses on your pubic bone and your legs
 - d) Pulling and stretching of muscles that may cause localized pain
6. WHAT IS NOT NORMAL?
 - a) Regular uterine tightening, 4 or more per hour, after resting for 1 hour and drinking 1 liter of water.
 - b) Rhythmic, painful lower abdominal cramps

- c) A low, dull backache that feels different than what you normally experience
- d) Persistent diarrhea or intestinal cramps
- e) An unusual rhythmic or persistent pelvic pressure
- f) A large amount of mucus or water leaking from the vagina
- g) A change in color of vaginal discharge to pink, brown, or red

REMEMBER: It is important to know what is normal for you. Then you will know how to identify what is not normal.

WHEN DO I GO TO THE HOSPITAL?

When you identify any of the above “not normal” symptoms. .

DO NOT HESITATE! You are doing your best for you and your baby by acting early and preventing preterm birth.

IMPORTANT TELEPHONE NUMBERS

Doctor: _____

Health Department: _____

Labor and Delivery: _____

Ambulance: _____