

**APPENDIX 2**

<b>SHOULDER DYSTOCIA PROFORMA</b>			Mother's Name _____ Date of Birth _____ Hospital Number _____ Consultant _____		
<b>MODE OF DELIVERY</b>	(PLEASE CIRCLE) SPONTANEOUS		INSTRUMENTAL Vacuum/Forceps		
Senior midwife called	YES	NO	TIME of Call	TIME of ARRIVAL	
Paediatrician called	YES	NO			
Obstetric Registrar / Consultant called	YES	NO			
Anaesthetic Registrar	YES	NO			
<b>PROCEDURE USED TO ASSIST DELIVERY OF THE SHOULDERS</b>					
Tick Order Time Performed by (print name)					
McRoberts' manoeuvre					
Suprapubic pressure and routine traction*					
Episiotomy (reason if not performed)					
Delivery of posterior arm .					
Internal manoeuvres (describe)					
Mother on all fours/other .....					
At delivery	Head facing mothers right – Right fetal shoulder anterior		Head facing mothers left – Left fetal shoulder anterior		
<b>Time of delivery of head</b>		<b>Time of delivery of body</b>		<b>Head to body delivery interval</b>	
<b>Fetal Condition</b>	Weight .....kg		<b>Apgar 1 minute</b>	<b>Apgar 5 minutes</b>	<b>Apgar 10 minutes</b>
<b>Cord pH/BE</b>	Arterial	Venous	Paediatric assessment at delivery		
Paediatric assessment at delivery	Any sign of arm weakness?		Yes/No		
	Any sign of bony fracture?		Yes/No		
	Baby admitted to NICU?		Yes/No		
	Assessment by:				
*Routine traction refers to the traction required for delivery of the shoulders in a normal vaginal delivery where there is no difficulty with the shoulders. Signed.....Print name.....Designation.....Date/Time.....					