

Name

Hosp No

Place patient sticker here

**Appendix 3**

**Counselling Sheet – VAGINAL BIRTH AFTER CAESAREAN SECTION**

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| **Risks/Benefits - VBAC** | **Elective Caesarean (tick discussed)** | **Recommendations (tick agreed)** |
| 75% (3:4) success 1 previous CS65% (6.5:10) success 2 prev CS90% (9:10) success if vaginal birth before/after CS10-35% (1:4) chance Em LSCS | Date not fixed Usually 39-40 weeksIf earlier need steroid injections to mature baby’s lungs | **VBAC CARE PLAN**Phone and come in earlyLabour in Hospital on main Labour Ward |
| **Mother** Decreased blood loss / haemorrhage / transfusion | **Mother**Increased serious blood clots x 5 (VBAC 0.2% 2:1000, El CS 1% 1:100) | Continuous fetal monitoring (CTG) from onset regular contractions,Pool if telemetry/available |
| Reduced maternal infection risk (VBAC 6% 6:100 El CS 8% 8:100) | Anaesthetic risks - Spinal / Epidural or may need GA | IV FBC G+S in labourEpidural available |
| 0.5% (1:200) chance scar dehiscence in labourMaternal death low (4/100,000) | Reduces dehiscence risk, Pre-labour incidence <0.02% (2:10,000)Maternal death x 3 (13/100,000) |  |
| **Perineal trauma**First del 90%9:10 Subsq 69%7:10Anal Sphincter OASIS 2-6% 5:100Instrumental 11-39% 1-4:10 **Other** Less postnatal painShorter hospital stay/recovery  | Can opt for sterilisation, but failure rate and regret high Decreased rate/maintenance of breast feeding>2xLSCS = El LSCS recommendedNo driving 6/52 | **El CS PLAN**39-40 weeks, to agree with cons<39 decided with consultantIf <39 for IM steroids |
| **Baby**Perinatal death =any first labour 0.04% (4:10,000) Brain damage 0.08% (8:10,000)Stillbirth awaiting labour 39+ 0.1% (1:1000) = any first labour  | **Baby** Increased neonatal breathing probs and Neonatal special care x 2 (VBAC 2% 2:100, El CS 5% 5:100)Fetal laceration 2% (2:100)Reduced sepsis/infectionPerintal death / Brain damage 0.01% 1:100,000 | **Increased risk with each CS** Abnormal placentation in future 4-7% (5:100)More scar tissue – more risk damage bladder(1:1000) bowel(1:3000) Hysterectomy (8:1000) |
| **If Induction** 2.5 x uterine rupture1.5 x Em CS than Spont VBAC | **If emergency LSCS** is neededRisk hysterectomy 0.5%(1:200)Risk transfusion 3% (3:100)Risk womb infection 8% (8:100) | **No difference if successful VBAC/ElCS** Hysterectomy 0.1% (1:1000)Long term maternal health PND PTSD |

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| **Preferences today:** | VBAC / El CS / Undecided | **PLAN:** CMW review atSenior RM Review at |  |
| If labours Pre 37/40If labours 37-39/40 pre El CS | VBAC / Em CSVBAC / Em CS | Cons ANC atPt specific pathway |  |
| For IOLNot for IOL | PG / Balloon / ARM / SyntoEl CS at gestation | RCOG leaflet given |  |

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| I confirm I have explained the above / answered questions | Name of Dr/RM | Signature | Designation | Date |