TABLE OF CONTENTS

INTRODUCTION

Introduction

How to read the Guide

Acronyms

Content

Structure and presentation

Assumptions underlying the guide

A

PRINCIPLES OF GOOD CARE

- A2 Communication
- A3 Workplace and administrative procedures
- 44 Universal precautions and cleanliness
- A5 Organising a visit

B

QUICK CHECK, RAPID ASSESSMENT AND MANAGEMENT OF WOMEN OF CHILDBEARING AGE

- B2 Quick check
- B3-B7 Rapid assessment and management
 - B3 Airway and breathing
 - B3 Circulation (shock)
 - B4-B5 Vaginal bleeding
 - B6 Convulsions or unconscious
 - B6 Severe abdominal pain
 - B6 Dangerous fever
 - B7 Labour
 - Other danger signs or symptoms
 - B7 If no emergency or priority signs, non urgent

REMERGENCY TREATMENTS FOR THE WOMAN

- Airway, breathing and circulation
 - Manage the airway and breathing
 - Insert IV line and give fluids
 - If intravenous access not possible
- B10-B12 Bleeding
 - B10 Massage uterus and expel clots
 - B10 Apply bimanual uterine compression
 - B10 Apply aortic compression
 - Give oxytocin
 - Give ergometrine
 - Remove placenta and fragments manually
 - After manual removal of placenta
 - B12 Repair the tear and empty bladder
 - Repair the tear or episiotomy
- B13-B14 Important considerations in caring for a woman with eclampsia or pre-eclampsia
 - Give magnesium sulphate
 - B13 Important considerations in caring for a woman with eclampsia
 - Give diazepam
 - B14 Give appropriate antihypertensive drug
- 115 Infection
 - B15 Give appropriate IV/IM antibiotics
- 116 Malaria
 - B16 Give arthemether or quinine IM
 - Give glucose IV
- Refer the woman urgently to the hospital
 - Essential emergency drugs and supplies for transport and home delivery

BLEEDING IN EARLY PREGNANCY AND POST-ABORTION CARE

- Examination of the woman with bleeding in early pregnancy and post-abortion care
- B20 Give preventive measures
- B211 Advise and counsel on post-abortion care
 - Advise on self-care
 - B211 Advise and counsel on family planning
 - B211 Provide information and support after abortion
 - Advise and counsel during follow-up visits

Table of contents

ANTENATAL CARE

- C2 Assess the pregnant woman: pregnancy status, birth and emergency plan
 - Check for pre-eclampsia
 - C4 Check for anaemia
 - C5 Check for syphilis
 - Check for HIV status
- Respond to observed signs or volunteered problems
 - C7 If no fetal movement
 - C7 If ruptured membranes and no labour
 - C8 If fever or burning on urination
 - C9 If vaginal discharge
 - C10 If signs suggesting HIV infection
 - C10 If smoking, alcohol or drug abuse, or history of violence
 - C11 If cough or breathing difficulty
 - C11 If taking antituberculosis drugs
- Give preventive measures
- C13 Advise and counsel on nutrition and self-care
- C14-C15 Develop a birth and emergency plan
 - C14 Facility delivery
 - Home delivery with a skilled attendant
 - C15 Advise on labour signs
 - C15 Advise on danger signs
 - C15 Discuss how to prepare for an emergency in pregnancy
- C16 Advise and counsel on family planning
 - C16 Counsel on the importance of family planning
 - C16 Special consideration for family planning counselling during pregnancy
- C17 Advise on routine and follow-up visits
- C18 Home delivery without a skilled attendant

CHILDBIRTH – LABOUR, DELIVERY AND IMMEDIATE POSTPARTUM CARE

- Examine the woman in labour or with ruptured membranes
- Da Decide stage of labour
- D4-D5 Respond to obstetrical problems on admission
- D6-D7 Give supportive care throughout labour
 - D6 Communication
 - D6 Cleanliness
 - D6 Mobility
 - D6 Urination
 - D6 Eating, drinking
 - D6 Breathing technique
 - Pain and discomfort relief
 - D7 Birth companion
- D8-D9 First stage of labour
 - Not in active labour
 - In active labour
- D10-D11 Second stage of labour: deliver the baby and give immediate newborn care
- D12-D13 Third stage of labour: deliver the placenta
- D14-D18 Respond to problems during labour and delivery
 - D14 If fetal heart rate <120 or >160 beats per minute
 - D15 If prolapsed cord
 - D16 If breech presentation
 - D17 If stuck shoulders (Shoulder dystocia)
 - D18 If multiple births
- Care of the mother and newborn within first hour of delivery of placenta
- D20 Care of the mother one hour after delivery of placenta
- D21 Assess the mother after delivery
- D22-D25 Respond to problems immediately postpartum
 - D22 If vaginal bleeding
 - D22 If fever (temperature >38°C)
 - If perineal tear or episiotomy (done for lifesaving circumstances)
 - D23 If elevated diastolic blood pressure
 - D24 If pallor on screening, check for anaemia
 - If mother severely ill or separated from the child
 - D24 If baby stillborn or dead
- Give preventive measures

CHILDBIRTH – LABOUR, DELIVERY AND IMMEDIATE POSTPARTUM CARE (CONTINUED)

- D26 Advise on postpartum care
 - D26 Advise on postpartum care and hygiene
 - D26 Counsel on nutrition
- D27 Counsel on birth spacing and family planning
 - D27 Counsel on the importance of family planning
 - D27 Lactation amenorrhea method (LAM)
- D28 Advise on when to return
 - D28 Routine postpartum visits
 - D28 Follow-up visits for problems
 - D28 Advise on danger signs
 - Discuss how to prepare for an emergency in postpartum
- D29 Home delivery by skilled attendant
 - D29 Preparation for home delivery
 - D29 Delivery care
 - D29 Immediate postpartum care of mother
 - Postpartum care of newborn

POSTPARTUM CARE

- Postpartum examination of the mother (up to 6 weeks)
- E3-E10 Respond to observed signs or volunteered problems
 - If elevated diastolic blood pressure
 - If pallor, check for anaemia
 - Check for HIV status
 - If heavy vaginal bleeding
 - If fever or foul-smelling lochia
 - If dribbling urine
 - If pus or perineal pain
 - If feeling unhappy or crying easily
 - If vaginal discharge 4 weeks after delivery
 - If breast problem
 - [5] If cough or breathing difficulty
 - If taking anti-tuberculosis drugs
 - If signs suggesting HIV infection

PREVENTIVE MEASURES AND ADDITIONAL TREATMENTS FOR THE WOMAN

- F2-F4 Preventive measures
 - F2 Give tetanus toxoid
 - F2 Give vitamin A postpartum
 - F3 Give iron and folic acid
 - F3 Give mebendazole
 - Motivate on compliance with iron treatment
 - F4 Give preventive intermittent treatment for falciparum malaria
 - F4 Advise to use insecticide-treated bednet
 - F4 Give appropriate oral antimalarial treatment
 - F4 Give paracetamol
- F5-F6 Additional treatments for the woman
 - F5 Give appropriate oral antibiotics
 - F6 Give benzathine penicillin IM
 - F6 Observe for signs of allergy

Table of contents

F INFORM AND COUNSEL ON HIV

- G2 Provide key information on HIV
 - What is HIV and how is HIV transmitted?
 - Advantage of knowing the HIV status in pregnancy
 - G2 Counsel on correct and consistent use of condoms
- Woluntary counselling and testing (VCT) services
 - 63 Voluntary counselling and testing services
 - G3 Discuss confidentiality of the result
 - 63 Implications of test result
- Benefits of involving and testing the male partner(s)
- G4 Care and counselling on family planning for the HIV-positive woman
 - 64 Additional care for the HIV-positive woman
 - G4 Counsel the HIV-positive woman on family planning
- Support to the HIV-positive woman
 - Provide emotional support to the woman
 - How to provide support
- G6 Prevent mother-to-child transmission of HIV
 - Give antiretroviral drug to prevent MCTC of HIV
 - Antiretroviral drug for prevention of MCTC of HIV
- Counsel on infant feeding choice
 - Explain the risks of HIV transmission through breastfeeding and not breastfeeding
 - G7 If a woman has unknown or negative HIV status
 - 67 If a woman knows and accepts that she is HIV-positive
- G8 If the mother chooses replacement feeding
 - G8 Teach the mother replacement feeding
 - G8 Explain the risks of replacement feeding
 - G8 Follow-up for replacement feeding
 - Give special counselling to the mother who is HIV-positive and chooses breastfeeding

THE WOMAN WITH SPECIAL NEEDS

- H2 Emotional support for the woman with special needs
 - H2 Sources of support
 - H2 Emotional support
- H3 Special considerations in managing the pregnant adolescent
 - H3 When interacting with the adolescent
- H3 Help the girl consider her options and to make decisions which best suit her needs
- Special considerations for supporting the woman living with violence
 - H4 Support the woman living with violence
 - Support the health service response to needs of women living with violence

COMMUNITY SUPPORT FOR MATERNAL AND NEWBORN HEALTH

- 12 Establish links
 - Coordinate with other health care providers and community groups
 - Establish links with traditional birth attendants and traditional healers
- Involve the community in quality of services

NEWBORN CARE

- Examine the newborn
 - If preterm, birth weight <2500 g or twin
 - Assess breastfeeding
 - Check for special treatment needs
 - Look for signs of jaundice and local infection
 - If danger signs
 - If swelling, bruises or malformation
- Assess the mother's breasts if complaining of nipple or breast pain
- Care of the newborn
- Additional care of a small baby (or twin)

BREASTFEEDING, CARE, PREVENTIVE MEASURES AND TREATMENT FOR THE NEWBORN

- Counsel on breastfeeding
 - Counsel on importance of exclusive breastfeeding
 - Help the mother to initiate breastfeeding
 - Support exclusive breastfeeding
 - Teach correct positioning and attachment for breastfeeding
 - Give special support to breastfeed the small baby (preterm and/or low birth weight)
 - Give special support to breastfeed twins
- Alternative feeding methods
 - Express breast milk
 - Hand express breast milk directly into the baby's mouth
 - Cup feeding expressed breast milk
 - Quantity to feed by cup
 - Signs that baby is receiving adequate amount of milk
- Weigh and assess weight gain
 - Weigh baby in the first month of life
 - Assess weight gain
 - Scale maintenance

- Other breastfeeding support
 - Give special support to the mother who is not yet breastfeeding
 - If the baby does not have a mother
 - Advise the mother who is not breastfeeding at all on how to relieve engorgement
- Ensure warmth for the baby
 - Keep the baby warm
 - Keep a small baby warm
 - Rewarm the baby skin-to-skin
- Other baby care
 - Cord care
 - Sleeping
 - Hygiene
- Newborn resuscitation
 - Keep the baby warm
 - Open the airway
 - If still not breathing, ventilate
 - If breathing less than 30 breaths per minute or severe chest in-drawing, stop ventilating
- If not breathing or gasping at all after 20 minutes of ventilation
- Treat and immunize the baby
 - Treat the baby
 - Give 2 IM antibiotics (first week of life)
 - Give IM benzathine penicillin to baby (single dose) if mother tested RPR-positive
 - Give IM antibiotic for possible gonococcal eye infection (single dose)
 - Treat local infection
 - Give isoniazid (INH) prophylaxis to newborn
 - Immunize the newborn
- Advise when to return with the baby
 - Routine visits
 - Follow-up visits
 - Advise the mother to seek care for the baby
 - Refer baby urgently to hospital

EQUIPMENT, SUPPLIES, DRUGS AND LABORATORY TESTS

- Equipment, supplies, drugs and tests for pregnancy and postpartum care
- Equipment, supplies and drugs for childbirth care
- Laboratory tests
 - Check urine for protein
 - La Check haemoglobin
- Perform rapid plamareagin (RPR) test for syphilis
 - 15 Interpreting results

INFORMATION AND COUNSELLING SHEETS

- M2 Care during pregnancy
- M3 Preparing a birth and emergency plan
- Care for the mother after birth
- M5 Care after an abortion
- M6 Care for the baby after birth
- W/ Breastfeeding
- M8-M9 Clean home delivery

RECORDS AND FORMS

- N2 Referral record
- N3 Feedback record
- N4 Labour record
- N5 Partograph
- N6 Postpartum record
- N7 International form of medical certificate of cause of death

GLOSSARY AND ACRONYMS