



Patient Safety Checklist ✓

Number 3 • December 2011

SCHEDULING PLANNED CESAREAN DELIVERY

Date _____ Patient _____ Date of birth _____ MR # _____
Physician or certified nurse-midwife _____ Last menstrual period _____
Gravidity/Parity _____
Estimated date of delivery _____ Best estimated gestational age (at admission) _____
Proposed cesarean delivery date _____

Indication (choose one):

- Medically indicated: Diagnosis: _____
- Repeat cesarean delivery (choose one) (1, 2):
 - Trial of labor not appropriate: Reason: _____
 - Trial of labor offered
 - Yes
 - No: Reason: _____
 - Patient counseled about risks and benefits of cesarean delivery versus trial of labor and vaginal delivery (1, 3)
 - Consent form signed as required by the institution
 - Repeat cesarean delivery for logistical reasons: Circumstances: _____
- Elective primary cesarean delivery at maternal request (4):
 - Patient counseled about risks and benefits of cesarean delivery versus vaginal delivery (1, 3)
 - Consent form signed as requested by institution
- Gestational age of 39 0/7 weeks or greater confirmed by either of the following criteria (5):
 - Ultrasound measurement at less than 20 weeks of gestation supports gestational age of 39 weeks or greater
 - Fetal heart tones have been documented as present for 30 weeks of gestation by Doppler ultrasonography

If this is an elective cesarean delivery and gestational age is 39 0/7 weeks or less, reason for variance:

Results of amniocentesis (if performed): _____

- Preoperative and pertinent prenatal laboratory test results (eg, group B streptococci or hematocrit) available (2)
- Special concerns (eg, allergies, medical problems, and special needs) _____
- Pertinent comorbid risk factors (maternal and fetal) _____

To be completed by reviewer:

- Approved cesarean delivery for gestational age equal to or greater than 39 0/7 weeks by the aforementioned dating criteria
- Approved cesarean delivery before 39 0/7 weeks of gestation (medical indication)
- HARD STOP** – gestational age, indication, consent, or other issues prevent initiating planned cesarean delivery without further information or consultation with department chair

References

1. Vaginal birth after cesarean delivery. Practice Bulletin No. 115. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2010;116:786–90.
2. American Academy of Pediatrics, American College of Obstetricians and Gynecologists. Intrapartum and postpartum care. In: *Guidelines for perinatal care*. 6th ed. Elk Grove Village (IL): AAP; Washington, DC: ACOG; 2007. p. 139–74.
3. Surgery and patient choice. ACOG Committee Opinion No. 395. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2008;111:243–7.
4. Cesarean delivery on maternal request. ACOG Committee Opinion No. 394. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2007;110:1501.
5. Fetal lung maturity. ACOG Practice Bulletin No. 97. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2008;112:717–26.

Standardization of health care processes and reduced variation has been shown to improve outcomes and quality of care. The American College of Obstetricians and Gynecologists has developed a series of patient safety checklists to help facilitate the standardization process. This checklist reflects emerging clinical, scientific, and patient safety advances as of the date issued and is subject to change. The information should not be construed as dictating an exclusive course of treatment or procedure to be followed. Although the components of a particular checklist may be adapted to local resources, standardization of checklists within an institution is strongly encouraged.

How to Use This Checklist

The Patient Safety Checklist on Scheduling Planned Cesarean Delivery should be completed by the health care provider and submitted to the respective hospital to schedule a planned cesarean delivery. The hospital should establish procedures to review the appropriateness of the scheduling based on the information contained in the checklist. A hard stop should be called if there are questions that arise that require further information or consultation with the department chair.

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Scheduling planned cesarean delivery. Patient Safety Checklist No. 3. American College of Obstetricians and Gynecologists. *Obstet Gynecol* 2011;118:1469–70.