

TAILORED GENTLE SECTION FOR BEST MATERNAL BONDING AND SURGICAL EXPERIENCE USING A MULTITUDE OF ACCOMMODATIONS

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Introduction

The celebration of a new baby's birth can be distracted by the stressful process of undergoing Cesarean section. A wider selection of parturients requesting gentle c-section is seen and was associated with decreased anxiety, maternal satisfaction, and better bonding with the baby at the moment of delivery. Here we describe the special accommodations requested from an OB physician colleague requesting an optimal delivery.



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Case Presentation

32-year-old parturient G2P1 at 39 of gestation presented for repeat c-section requesting a gentle or family-centered delivery. The care team's goal was to make the delivery as natural as possible, accommodate in a way to relieve patient anxiety, as well as improve maternal and baby outcomes.

Pre-operative:

- NPO status: Clear liquid up to 2 hours prior C-section

Intra-operative course:

- Lines: 16 Gauge Iv line in the non dominant forearm
- EKG leads : 5 leads at the back
- Procedure: Spinal anesthesia in the lateral position to increase the comfort.
 - 27G pencil tip needle to reduce the risk of PDPH
 - 12 mg of hyperbaric bupivacaine, 50mcg of clonidine (instead of fentanyl which is the standard in our institution), 100 mcg of morphine.
 - Clonidine : decrease the risk of spinal induced shivering, itching, and N/V.
- New 18 G placed in lower extremity, NIBP and pulse oximeter repositioned to lower extremity.
- We used low dose propofol infusion (10 mcg/kg/min), and 8 mg of dexamethasone for nausea

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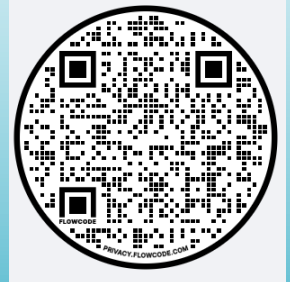
Case Presentation

- Position : on ramp pillow to reduce dyspnea feeling, better birth viewing via clear drape.
- Husband and mother were present at the time of delivery.
- Patient was able to see the baby at the moment birth, and to hold him through the clear drape.
- Bilateral quadratum lumborum and transversalis fascia blocks were performed for postoperative pain control.
- Same day, patient was ambulating, and eating better than her first c-section.

Conclusion

The tailored baby-friendly technique is a way to improve the surgical experience and make it the closest to the natural birth for early bonding with the baby at his “golden hour” by decreasing the risk of itch, nausea, shivering, PPDH, and improved control of post-operative pain. For the family, this is a once in the lifetime experience, and making all these small accommodations leads to the overall best experience.

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For recommendations