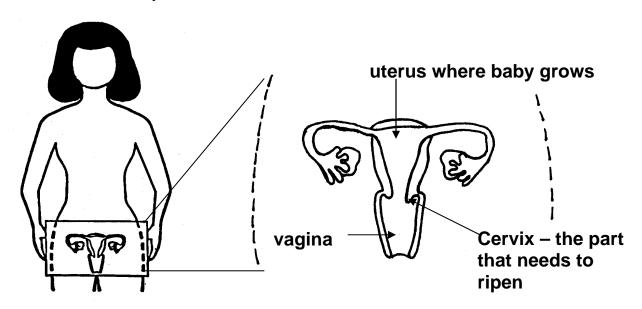


Cervical Ripening Using medication called Cervidil™

What is cervical ripening?

The cervix is the part of your body at the lower end of the uterus. During pregnancy the cervix is closed to keep the baby inside the uterus. During labour the cervix needs to open wide enough to let a baby come through. This is called dilation. The process of the cervix changing from closed and firm to soft and thin is called cervical ripening. The picture below shows the cervix, uterus and vagina in a non pregnant woman so you can see where they are.



Why do I need cervical ripening?

Your doctor or midwife has decided that it would be best to have your baby in the near future. Common reasons for this include being 7 to 10 days past your due date, or there are health concerns for you or your baby. Due to these concerns, your doctor or midwife feels it is best to have your labour started or induced. All women who have cervical ripening are expected to deliver in the hospital.

How is cervical ripening done?

Your doctor will talk to you about the ways a cervix can be dilated. One way is by using a medication called Cervidil™. Cervidil™ contains a hormone called prostaglandin and comes in an insert that looks like a tampon. It is placed in your vagina. The medication is released slowly over 24 hours.

You and your baby are monitored closely for 1 hour after the medication is put in. You then go home and wait to start labour.

What are the benefits and risks of cervical ripening?

You should understand the benefits and risks before you agree to this procedure. After you talk to your doctor or midwife and have your questions answered, you sign a consent form. You may sign the consent form in the office or on the day of the procedure at the hospital.

Benefits

- Some women go into labour after cervical ripening without needing induction with a medication called oxytocin.
- Cervical ripening may help natural labour to start or shorten labour.
- When the cervix is thin and soft, induction with a medication called oxytocin is more successful.
- Cervical ripening can be done as an outpatient.

Risks

 After the medication is inserted into the vagina, your uterus could begin contracting too fast or the contractions could last more than 90 seconds. You and your baby are monitored for at least 1 hour to make sure you have no reaction to the medication.

Getting ready . . .

The day before your procedure . . .

- Arrange to have someone look after other children at home. Children at the hospital must be looked after by another adult that comes with you. Hospital staff will not look after them.
- Pack a bag in case you need to be admitted to the hospital. After the
 procedure, members of the health care team will assess you and decide
 if you can go home or need to stay. For this reason, arrange for care of
 other children at home in case you need to stay at the hospital.

The day of your procedure . . .

Have a light meal before coming to hospital:

- a light breakfast may be cereal, toast and drink.
- a light lunch may be soup, sandwich and drink

Plan to arrive at the Birthing Unit Registration on Level 2 of the Bishop Dowling Wing, 15 minutes before your appointment time.

On the Birthing Unit

After you tell the receptionist that you are here for cervical ripening the nurse will come and get you. You change into a hospital gown and go to the washroom. The nurse then puts a monitor on your tummy to monitor the baby. The doctor explains the procedure and you sign the consent form if you have not already signed one. The doctor then inserts the medication into your vagina. The nurse stays with you and monitors you and your baby.

Before you go home . . .

- The nurse reviews what to do at home.
- You will have an appointment to come back so you can have your labour induced.
- Some women begin labour on their own after cervical ripening. If this contact the Birthing Unit and follow the advice given.

At home after the procedure . . .

 Do your normal daily activities. You do not have to follow any special diet or routine at home.

Call the Birthing Unit if:

- contractions in your uterus last more than 90 seconds each
- you have more than 3 contractions in 10 minutes
- contractions become very painful
- your water breaks
- you have vaginal bleeding
- your baby's movements are much more active or much less active

Follow the advice given when you call. You may need to come into the unit to be assessed.

If you are not sure about what you are feeling or have concerns when you are home, call the Birthing Unit:

905-522-1155 ext. 33251

