



Neil Foster

Obstetrics & Gynecology

VAGINAL BIRTH AFTER CESAREAN SECTION POLICY

If you are interested in pursuit of a vaginal delivery after your cesarean section, I must ask you to accept the following terms:

- You will be examined at 38 weeks to determine if your cervix is "ripe" or ready for labor. I will determine this and will not allow an attempt of vaginal delivery if the cervix is "unripe" by your due date. If the cervix is "ripe", you may elect to wait until 41 weeks for delivery by cesarean section.
- I will determine the best estimate of your due date and this will be used for any further consideration of your plan to attempt vaginal delivery.
- You will be scheduled for repeat cesarean section on a day not past your due date. You must go into labor spontaneously and be in the active phase of labor by your due date. If you do not, you will proceed to delivery by cesarean section.
- In labor you will receive an epidural early in labor. I will order this when I am certain that you are in active labor. Active labor is defined as regular contractions that are strong enough to dilate your cervix and that those contractions are persistent.
- If your water breaks and you are not in active labor, you will have a repeat cesarean section.
- If your pregnancy is considered to be high risk, you will be delivered when it is deemed necessary by that risk factor. This will require a repeat cesarean section unless you happen to achieve active labor prior to the required date of delivery.
- When admitted in labor your baby will be continuously monitored.
- You will have a Foley bladder catheter inserted on admission in labor.
- During labor you will be delivered by cesarean section if you have a non-reassuring fetal heart rate tracing and/or you have vaginal bleeding.
- In the event that you need to be delivered expediently, the Anesthesiologist and I will determine the most appropriate form of anesthesia for delivery.
- I cannot guarantee that, in the event of an emergency, your baby can/will be delivered within ten minutes of the decision to deliver your baby.
- Every practical attempt to deliver a healthy baby, and to protect your health, will be undertaken but no guarantees about maternal or fetal outcome can be guaranteed.
- You will accept that there is a risk of fetal and/or maternal harm attempting to deliver vaginally after cesarean section. The degree of risk is difficult to calculate but is greater and, in some ways, different than the risk of a planned cesarean section.
- You are welcome to seek your prenatal care elsewhere as opinions about VBAC policy differ between healthcare practitioners. You should recognize that it will be more difficult/impossible to find an accepting physician as the pregnancy advances. You should consider this in the timing of your decision to seek care elsewhere.

I acknowledge having read this document and am willing to comply with the policy stated above.

Name: _____ Signature: _____ Date: _____