

Patient Name: _____ Gestational age at the time of induction: _____

Final EDC: _____ Bishop's Score: _____

Procedure: Induction of Labor is a procedure where medications (such as misoprostol, or pitocin) or procedures such as breaking the bag of water or placing a balloon in the cervix to make it open) are used to start the labor process.

- Medically-indicated induction: My physician/nurse midwife recommends starting labor because of a medical condition involving me or my baby. My provider feels that inducing labor to deliver my baby is safer for us than continuing the pregnancy. The reason for the medical induction is:

- Non Medically-indicated Induction: My physician/nurse midwife agrees to starting labor instead of waiting for labor to start. There is not a medical reason to induce labor to deliver now instead of continuing the pregnancy. My pregnancy must be at least 39 weeks for me to choose a Non Medically-indicated Induction.

Risks/ Side/ Effects: With some induction methods, the uterus can be overstimulated, making my contractions too strong or too close together. Too many contractions may lead to changes in my baby's heart rate or other problems. Other risks of labor induction include, but are not limited to, an increased rate of cesarean delivery (this risk is increased if this is my first delivery), longer labor than if my labor started on its own, and an increased risk of infection in myself or my baby. In very rare cases, there is a risk of uterine rupture or fetal death. Medical problems that were present before pregnancy or occurred during pregnancy may contribute to these complications. Additional individual risks that are specific to me may include:

Benefits: If my physician/nurse midwife recommends a medically-indicated induction, it is safer for me or my baby to deliver now and not wait for labor to start on its own. If I am undergoing an elective induction, this allows me to choose when I go into labor and deliver my baby for reasons that may be important to me and my family. Additional individual benefits that are specific to me may include:

Alternatives: The alternatives to induction of labor include watchful waiting and primary cesarean delivery. Watchful waiting includes continuing my prenatal care until labor starts on its own. If I am having medically-indicated induction, watchful waiting is not a safe alternative and there is a medical reason induction is being recommended at this time. Primary cesarean delivery carries additional risks both for this pregnancy and in future pregnancies.

Potential for Delivery: I understand that the induction process may not start my labor. A failed attempt at induction may mean that a different induction method may be tried or I may need a cesarean delivery. My physician/nurse midwife discussed this possibility with me and I understand that if labor does not start, and there is not a medical indication for my induction, I may be released to go home.

CONSENT FOR INDUCTION OF LABOR

I have read the above information, and I have had the chance to ask my provider questions. All of my questions have been answered to my satisfaction. I wish to proceed with labor Induction at this time.

Patient Name (print) _____ Patient Signature _____ Date _____ Time _____

Physician/Nurse Midwife Name (print) _____ Signature _____ Date _____ Time _____

Witness Signature _____ Date _____ Time _____

Name of Interpreter/Translator: (print) _____ Agency: _____



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