Birth Options After a Cesarean Delivery*

Information to Help You Make an Informed Decision
About How You Want to Give Birth

Patient Name _______________________________ Date of Birth____________________

Physician Name__________________________________________________________

After having a cesarean delivery, you must decide between a repeat cesarean and a vaginal delivery for the birth of your baby. Research has determined that a vaginal birth is a reasonable option for many women with success rates of 60-80%. Because both routes of delivery have risks, we want to help you understand the risks and benefits of both options. Additionally, your OB provider will discuss with you any individual factors that may affect your decision.

What are my chances for a successful vaginal birth?

Factors that may affect your chances include:

- If you ever delivered vaginally from 37 weeks to 41 weeks of pregnancy
- The reason you had a cesarean
- The kind of incision you had for your cesarean
- The length of your previous labor
- Maternal age
- The size of your baby
- How far you got in labor last time

What are the benefits of vaginal birth compared to planned cesarean birth?

- Faster time to heal after birth
- Shorter hospital stay
- Less chance of need for blood transfusion
- Less risk of infection after delivery
- Less risk the baby will have breathing problems
- Quicker return to normal activities, as there is more pain from surgery
- Greater chance of vaginal birth in later pregnancies
- Less risk of problems with how the placenta attaches in future pregnancies

What are the risks of vaginal birth to the mother?

- Normal risks of vaginal birth
- Previous incision in the uterus opening - occurs in 7 to 10 out of 1000 low risk women.
- If this occurs, there are possible risks:
• Blood loss and the need to give you blood
• Need to remove your uterus (hysterectomy). This means you will never be pregnant again.
• Damage to your bladder
• Infection
• Blood clots in legs or lungs
• Death, which is rare (4 women in every 100,000 live births)

Any of the following may increase your risk of the previous incision in your uterus opening during labor:

• Labor that does not start on its own (labor induction)
• Location of uterine scar
• More than one cesarean section
• Less than 18 months since your last cesarean delivery
• Need for medicine during labor to increase your contractions
• During your labor there may be a reason your doctor would need to perform a cesarean to deliver your baby. The risks of a cesarean delivery are higher when it is done as an emergency. The risk of infection may be double in those cases.

What are the risks of vaginal birth to the baby?

• Normal risks of a vaginal birth which could include shoulder dystocia and cord compression.
• The previous incision in your uterus could open and may harm your baby. 1 in 2000 babies experience brain damage or death if the previous incision opens during labor.

What are the risks of a planned cesarean birth, if that is my choice?

• Previous incision in the uterus opening. The chance of this is about 5 in 1,000 cesarean sections. This is because there is a scar on your uterus from the cesarean delivery you had before. The opening usually occurs during labor. Risks to you and the baby are the same as if the opening happened during labor.

What are the risks of a planned cesarean, if that is my choice?

• Blood loss with possible need to give you blood
• More scars on your uterus and inside your abdomen
• Infection
• Injury to organs inside your body
• Problems with anesthesia (drugs that make you numb and take away pain)
• Blood clots in legs or lungs
• Problems with the placenta (organ that nourishes your baby in your uterus) in future pregnancies
• Death, which is very rare
Where can I have my baby?

Some hospitals do not have the optimal resources necessary to offer a scheduled vaginal birth after a previous cesarean. All hospitals do have a process for assembling needed staff in emergency situations even though there are times when certain members of the staff are not on-site at some hospitals. If you choose a vaginal birth, your OB provider will work with you to arrange for your delivery at a hospital that offers optimal care for labor after a cesarean. Your OB provider can continue to manage your prenatal care and will work with you to coordinate your delivery plans. You will return to your OB provider for postpartum care.

By signing this form, I agree that:

- I read this form or had it explained to me in words I can understand.
- I understand there are risks associated with both planned cesarean delivery and vaginal birth after a cesarean.
- I had time to read the patient education material.
- I had time to speak with my OB provider about repeat cesarean delivery and vaginal birth after a cesarean. My OB answered my questions.
- If I choose to labor and deliver vaginally as my birth option for this baby, I will work with my OB provider to plan my delivery at a hospital that offers optimal labor care for women in labor after a cesarean.
- If I choose to labor and deliver vaginally, I understand my doctor may still need to deliver my baby by cesarean section.

_______________________________________________________

Time AM PM Date Patient Signature

_______________________________________________________

Time AM PM Date Witness to Signature

Interpretation Services

I certify that I have interpreted, to the best of my ability, into and from the participant’s stated primary language, all oral presentations made by all of those present during the discussion.

_______________________________________________________

Time AM PM Date Interpreter Signature

Interpreter Name (please print)

Confidentiality of this medical record shall be maintained except when use of disclosure is required or permitted by law, regulation, or written authorization by the patient.

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