Turning a Breech Baby: Care Instructions





Frank breech

C Healthwise, Incorporated

Your Care Instructions

At the end of a pregnancy, most babies have their head near the birth canal (vagina). But sometimes a baby's rear end or feet are near the birth canal. This position is called breech.

If your baby stays in this breech position, you will probably need a cesarean section (C-section). Most breech babies are healthy and don't have problems after birth.

Your doctor may try to turn your baby. To do this, the doctor presses on certain places on your belly. Sometimes this causes the baby to turn. The medical name for this process is external cephalic version.

If your baby turns, your doctor may send you home. But he or she will check you often until your labor begins. If your baby's head stays down, you may be able to have a vaginal delivery. But a small number of babies move back into a breech position.

During the process of trying to turn your baby, your doctor will carefully watch your uterus. It's possible that the pressure and movement might start contractions. It's also possible that the umbilical cord will twist or get damaged.

Follow-up care is a key part of your treatment and safety. Be sure to make and go to all appointments, and call your doctor if you are having problems. It's also a good idea to know your test results and keep a list of the medicines you take.

What happens during an external cephalic version?

- Your doctor will give you medicine to relax your uterus. Your doctor may give you medicine for pain and to help you relax.
- Your doctor will put both hands on your belly. One hand will be near the baby's head. The other hand will be near the baby's rear end. The doctor will push and roll the baby to try to get the head down.
- You may feel some pain. The doctor will ask you how you are doing.
- Your doctor will use a heart monitor to see how your baby is doing.
- After the process, your doctor will give you instructions for your care.

Why might you choose to have your baby turned?

- You would like to have a vaginal delivery, if possible.
- You are 36 or more weeks pregnant with one baby.
- Your baby has not dropped into your pelvis. It's easier to move a baby that has not dropped.
- Ultrasound shows that you have plenty of amniotic fluid around your baby.

What are the risks if your doctor tries to turn your baby?

- You will feel pressure or pain when the doctor presses on your belly.
- You may need an emergency cesarean section.
- The process may cause you to start contractions. In rare cases it can cause the water to break.
- This process may not work. ٠

When should you call for help?

Call anytime you think you may need emergency care. For example, call if:

- You passed out (lost consciousness).
- You have severe vaginal bleeding.

Call your doctor now or seek immediate medical care if:

- You have any vaginal bleeding.
- You have pain in your belly or pelvis.
- You think that you are in labor.
- You have a sudden release of fluid from your vagina.
- You notice that your baby has stopped moving or is moving much less than normal.

Watch closely for changes in your health, and be sure to contact your doctor if you have any questions or concerns.

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