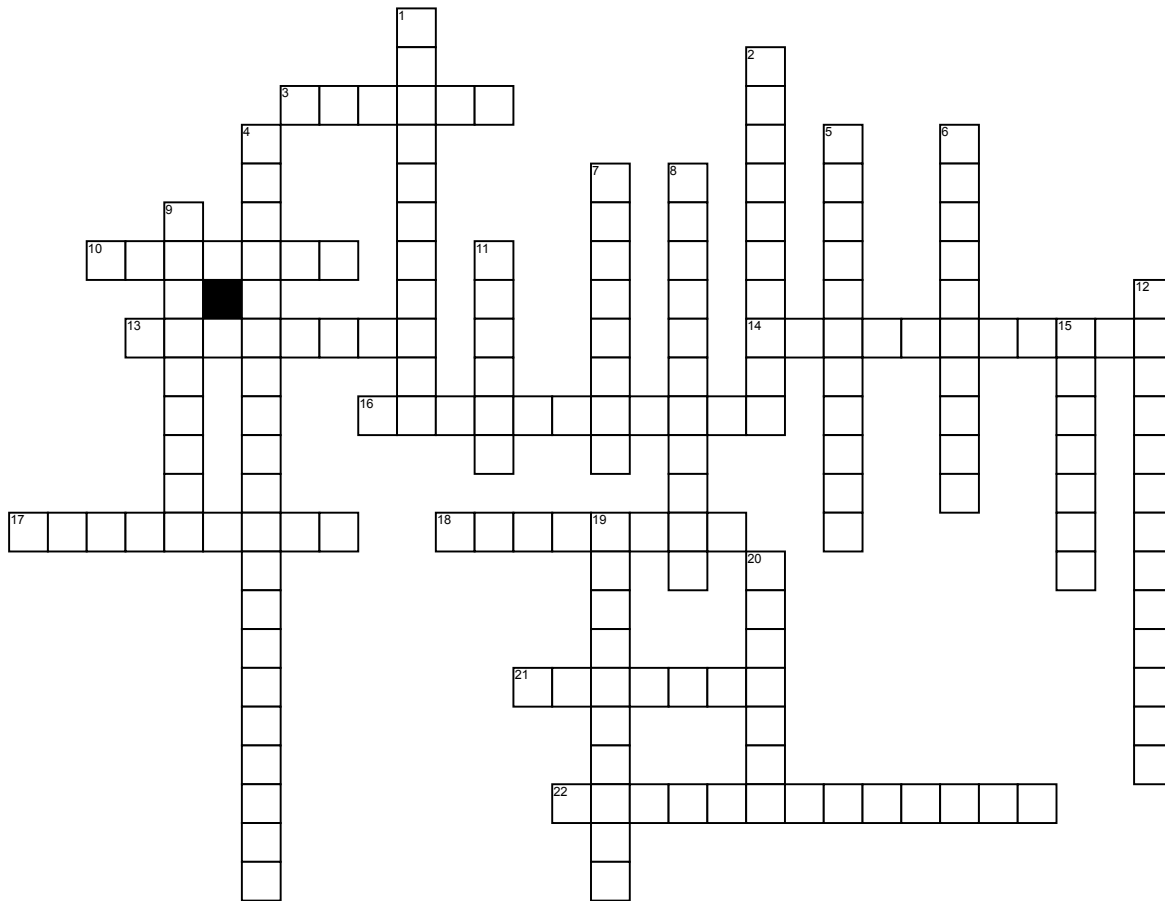


Name: _____

Date: _____

MoreOB - Back to the Basics



Across

3. Designed to apply traction upon the fetal scalp to assist maternal expulsive effort and it is unlikely to succeed in the absence of maternal expulsive effort

10. The relationship between the leading edge of the presenting part and ischial spines (the skull, not caput in a vertex presentation) expressed in centimeters

13. Delayed or arrested progress in labour, irrespective of cause greater than 4 hours of <0.5cm per hour dilation or no cervical dilation over 2 hours during the first stage

14. Patter of contractions leading to cervical effacement and dilation after 4cm dilation for nulliparous and 4-5cm for parous

16. Full Dilation to delivery of baby

17. What is the mnemonic by MoreOB to safely complete an assisted vaginal birth

18. The opening of the cervix measured in centimeters

21. Initiation of contractions in a pregnant woman who is not in labour to help her achieve a vaginal birth within 24-48 hours

22. Fully dilated but awaiting for the urge to push before the mother starts pushing

Down

1. Immediately after delivery of the placenta to one hour postpartum

2. Regular uterine contractions plus cervical change (dilation and effacement) until fully dilated

4. Refers to the use of vacuum or forceps to achieve a vaginal delivery in the second stage of labour

5. Presence of uterine activity resulting in progressive effacement and dilation of the cervix proceeding to the active phase (nulliparous=4cm, parous 4-5cm)

6. Thinning of the cervix

7. Our goal as a team is to _____ assisted vaginal deliveries by 5% this year

8. After assisted vaginal delivery, the women should be given a clear _____ describing the procedure and the outcome

9. A communication tool used when caring for all labouring women to review risk factors, evaluate current fetal status and review the management plan. It is similar to the idea of a surgical pause

11. Comprehensive performance improvement program that creates a culture of patient safety in obstetrical units

12. Changing ones position in labour to help optimize the mother's comfort and progression of labour

15. Labour contractions are not adequate to ensure cervical dilation and/or fetal descent therefore, enhancement of contractions is necessary (oxytocin or artificial rupture of membranes)

19. Immediately after delivery of the baby to delivery of placenta

20. What does the letter "B" stand for in the MoreOB mnemonic for assisted vaginal birth