

Dakshata



Checklist for Management of PPH Due to Retained Placenta

Situation: You are alone in a rural health facility; you gave a uterotonic medication within 1 minute of delivery, and have provided controlled cord traction during contractions and monitored your patient's bleeding for the past 30 minutes. She remains stable, but continues to bleed slowly, and her placenta has not delivered.

S.No.	Task	Cases				
		1	2	3	4	5
1	Provide controlled cord traction with each contraction					
2	Guard uterus while providing controlled cord traction					
3	Identify that the placenta may be retained					
4	Give a second dose of medication telling what dose, route and why (IV drip with Injection oxytocin 20 units in 1000 ml of Ringer Lactate at 40-60 drops per minute)					
5	Identify that the patient must be transported					
6	The baby will be kept with the mother					
7	Communicate respectfully and provide needed information to the mother throughout					
8	Plan to transport mother and baby to higher centre					

Checklist for Management of PPH due to Atonic Uterus

Situation: You are alone in a rural facility. You have given 10 units of oxytocin IM and performed controlled cord traction with 3 contractions resulting in delivery of the placenta. The uterus never contracts and bleeding starts out moderate, then increases

S.No.	Task	Cases					
		1	2	3	4	5	
1	Massage the uterus						
2	Check the woman's bleeding						
3	Inspect the placenta for completeness and any missing pieces						
4	Re-check the tone of uterus and bleeding						
5	Give a second dose of medication telling what dose, route and why (IV drip with Injection oxytocin 20 units in 1000 ml of Ringer Lactate at 40-60 drops per minute)						
6	Re-check bleeding and uterine tone						
7	Ensure that the urinary bladder is empty/catheterize if bladder is full						
8	Put on long gloves						
8	Explain to patient that you will be providing bi-manual compression						
9	Provide bi-manual compression						
10	Make the decision to transfer						
11	Explain to the patient about the need to be transported for advanced care as she is at risk for complications that cannot be treated at this local facility, or is "too high risk", or "might bleed again", or may need blood transfusion						