Third Stage of Labor

- Prepare for delivery of placenta
- Signs that suggest placental separation:
  - the uterus rises upward in the abdomen
  - as the placenta moves downward, the umbilical cord lengthens
  - a sudden trickle or spurt of blood appears
  - the shape of the uterus changes from a disk to a globe
- Ask woman if she wishes to dispose of placenta in any specific manner (according to cultural traditions).
- To assist the woman in the delivery of the placenta, if possible, have her push during a uterine contraction (after the signs of placental separation have occurred)
- Nursing priorities during this period focus on assessment of:
  - maternal physiologic status
  - neonatal physiologic status
  - prevention of maternal hemorrhage
  - early family responses to the newborn
- Monitor maternal physiologic status:
  - vital signs immediately before and after the signs of placental separation are noted
  - blood loss
  - level of pain
- The physiologic changes in the mother after birth are profound:
  - cardiac output increases rapidly as maternal circulation to the placenta ceases and the pooled blood from the lower extremities is mobilized
  - cardiac output during labor and delivery is at its highest within the first 5 minutes following delivery
  - The pulse rate slows in response to the change in cardiac output and tends to remain slightly slower than the prepregnancy rate for about 1 week.
  - Blood pressure usually returns to prepregnancy levels soon after birth, however:
    - BP may be elevated due to excitement or certain medications
    - BP may be lowered by analgesics or anesthetics
Third Stage of Labor

- Observe for signs of potential problems as the placenta is being delivered:
  - altered level of consciousness
  - alteration in respirations
- This period represents a time of greater risk for a woman with a preexisting cerebral aneurysm, greater risk for pulmonary emboli, and greater risk of amniotic fluid embolus
- Monitor neonatal physiologic status:
  - adaptation to extrauterine life
  - Apgar scoring
  - vital signs
  - respiratory and cardiovascular functioning
- Assess family responses to the neonate:
  - Be sure to consider
  - maternal fatigue level,
  - administration of analgesia or anesthesia,
  - level of pain,
  - maternal parity, and
  - cultural background when making your assessment.
- Nursing Interventions:
  - Massage the uterus after placental delivery in order to stimulate contraction of the uterus
  - After delivery of the placenta, administer pitocin to promote contraction of the uterus thereby helping to prevent hemorrhage
  - Be prepared to administer uterotonic drugs if a hemorrhage occurs
- If the woman complains of chills, cover her with a warm blanket.
- Support neonatal physiologic adjustment by facilitating drainage of secretions, maintaining a patent airway, and preventing injury.
- Support neonatal thermoregulation
- Promote parent-newborn interaction

Fourth Stage of Labor

- Follow hospital guidelines re: frequency of postpartum vital signs and checks