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NYBirthingCenter.com

6700 3rd Avenue, Brooklyn, NY 11220

Stages of Childbirth: Stage I

Going through the birth of your child is a wonderful and unique experience. No two deliveries are alike and there is no way to tell how your delivery is going to be. What we can tell you is the stages you will go through during this process and what you can generally expect. Childbirth can be broken into three stages: *First stage*: Begins from the onset of true labor and lasts until the cervix is completely dilated to 10 cm; *Second stage*: Continues after the cervix is dilated to 10 cm until the delivery of your baby; *Third stage*: Delivery of your placenta.

First Stage of labor is the longest and is broken down into three phases:

- **Early labor phase:** Starts from the onset of labor until the cervix is dilated to 3 cm.
- **Active labor phase:** Continues until the cervix is dilated to 7 cm.
- **Transition phase:** Continues until the cervix is fully dilated to 10 cm.

Each phase is full of different emotions and physical challenges. It is one big adventure you are about to take and we would like to give you a guide for it.

Early Labor Phase

During this phase you should just *relax*. It is not necessary for you to rush to the hospital. It might be nicer for you to spend this time at home, in familiar territory. If it is during the *day* you should do daily simple routines around the house. Keep yourself occupied but still conserve some of your energy. Drink plenty of water and eat small snacks. Keep track of the time of your contractions. If it is during the *night* it is a good idea to try and get some sleep. If you can't fall asleep, do things that will distract you like cleaning out your closet, packing your bag, or making sack lunches for the next day.

What to expect:

- Duration will last about 8-12 hours
- Your cervix will efface and dilate to 3 cm
- Contractions will last about 30-45 seconds, giving you 5-30 minutes of rest in between contractions
- Contractions are typically mild, somewhat irregular, but progressively stronger and closer together
- Contractions may feel like aching in your lower back, menstrual cramps, and pressure or tightening in the pelvis area
- Your water may break; also known as amniotic sac rupture (this can happen any time within the first stage)



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When monitoring contractions observe the following:

- Growing more intense
- Following a regular pattern
- Lasting longer
- Becoming closer together

When your water breaks (amniotic sac ruptures) note the following:

- Color of fluid
- Odor of fluid
- Time rupture occurred

Tips for the support person:

- Practice timing contractions
- Be a calming influence
- Offer comfort, reassurance, and support
- Suggest activities that will distract her

Keep up your own strength, you will need it!

If you cannot be with her during this early phase, simply do these things on the phone. Don't feel bad if you are not there. If the contractions are fairly far apart then you have plenty of time to get there.

Active Labor Phase:

It is about time for you to head to the hospital. Your contractions will be stronger, longer and closer together. It is very important that you have all the support you can get. Now is also a good time for you to start your breathing techniques and try some relaxation exercises for you to use in between contractions. You should switch positions often during this time. You may want to try walking or taking a nice bath. Continue to drink water. Remember to urinate periodically.

What to expect:

- Duration will last about 3-5 hours
- Your cervix will dilate from 4cm to 7cm
- Contractions during this phase will last about 45-60 seconds with 3-5 minutes rest in between
- Contractions will feel stronger and longer



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Tips for the support person:

- Give your undivided attention, offer verbal reassurance and encouragement
- Massage her abdomen and lower back
- Keep track of contractions
- Go through the breathing techniques with her
- Help make her comfortable (prop pillows, get her water, apply touch)
- Remind her to change positions frequently (take her for a walk or offer her a bath)
- Continue with distractions (music, reading a book, playing a simple card game)
- Don't feel bad if she is not responding to you

Transition Phase

During this phase you will rely heavily on your support person. This is the hardest phase to go through but you are almost to the end. Think "one contraction at a time." This may be hard to do if the contractions are running together, but just think about how far you have come. When you feel an urge to push, wait until you are instructed to. Forget that this is the hardest phase and remember that it is the shortest.

What to expect:

- Duration will last about 30 min-2 hrs
- Your cervix will dilate from 8cm to 10cm
- Contractions during this phase will last about 60-90 seconds with a 30 second-2 minute rest in between
- Contractions are long, strong, intense, and may overlap
- This is the hardest phase but thankfully the shortest
- You may experience hot flashes, chills, nausea, vomiting, or gas

Tips for the support person:

- Offer lots of encouragement and praise, but cut the small talk
- Continue breathing with her, and help guide her through her contractions with encouragement
- Encourage her to relax in between contractions
- Don't feel hurt if she seems to have really strong anger toward you, it's just a phase she is going through!



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Stages of Childbirth: Stage II

The second stage of childbirth is pushing and delivery of your baby. Up until this point your body has been doing all the work for you. Now that your cervix has fully dilated to 10 cm it is time for your help. Time to PUSH!

Pushing and what to expect:

- The entire process of the second stage lasts anywhere from 20 minutes to 2 hours
- Contractions will last about 45-90 seconds with a 3-5 minute rest in between
- You will have a strong natural urge to push
- You will feel strong pressure at your rectum
- Most likely you will have a slight bowel or urination accident but don't be embarrassed
- Your baby's head will eventually crown (become visible)
- You will feel a burning, stinging sensation during crowning

Pushing and what to do:

- Get into a pushing position (one that uses gravity to your advantage)
- Push when you feel the urge, unless told otherwise
- Relax your pelvic floor and anal area (Kegel exercises can help)
- Rest between contractions so you can regain your strength
- Use all your energy to push
- Do not feel discouraged if your baby's head poked out and then goes back in (this process can take two steps forward and then one step back)

Tips for the support person:

- Help her to be relaxed and comfortable
- Encourage, encourage, encourage
- Be her guide through her contractions
- Affirm what a great job she has done and is doing

What your baby is doing:

While you are in labor your baby is taking steps to enter this world.

1. Your baby's head will turn to one side and the chin will automatically rest on the chest so the back of the head can lead.
2. Once you are fully dilated, your baby's head and torso begin to turn to face your back as they enter your vagina.
3. Next your baby's head will begin to emerge or "crown" through the vaginal opening.



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4. Once your baby's head is out, the head and shoulders turn to face your side. This position allows your baby to slip out.

Delivery and what to expect:

He/she has been through contractions, and your very narrow birth canal. The results of this journey include:

- Cone-shaped head
- Vernix coating (cheesy substance that coats the fetus in the uterus)
- Puffy eyes
- Lanugo (fine downy hair that will shed by the end of the first week)
- Enlarged genitals

Stages of Childbirth: Stage III

The third stage is the delivery of the placenta and is the shortest stage. The time it takes to deliver your placenta is anywhere from 5 to 30 minutes.

What to expect & what to do:

After the delivery of your baby, your healthcare provider will be waiting for small contractions to begin again. This is the signal that your placenta is separating from the uterine wall and ready to be delivered. You may experience some severe shaking and shivering after your placenta is delivered. This is common and nothing to be alarmed about.



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False Labor

As your estimated time of delivery approaches you may notice that "Braxton Hicks" contractions become more frequent and intense. Contractions seem to follow a continuum from Braxton Hicks to real labor. It is very common for women to think that they are experiencing the real thing only to go to the hospital or call their midwife and be told it was a false alarm or "False Labor." You may be asking yourself, What is false labor? How will I know if I am experiencing false labor? The following information will be a guide for you as the time draws closer: Contractions are irregular and unpredictable (for example, in intervals of ten minutes, then six minutes, two minutes, eight minutes, etc.)

1. No progression is seen over time
2. Contractions are felt as a generalized abdominal tightening
3. Change in activity or position causes contractions to slow down or stop
4. There is usually no bloody show
5. Membranes will not rupture

In true labor the pain tends to begin high in your abdomen, radiating throughout your entire abdomen and lower back, or visa versa. In false labor the contractions are often concentrated in the lower abdomen and groin.