

Vaginal Exams

REMEMBER RESPECTFUL MATERNAL CARE!



Some Things To Consider

- Ask permission first
- Establish a “Key Word” indicating when the person requests to have the exam pause and then a “Key Word” indicating when the person requests the exam stop
 - Bundle Birth Podcast # 64 “They Did NOT Just Say That!” aired June 24th, 2024

Vaginal Exam Procedure

- Ensure privacy – door closed, curtain pulled, and patient draped using bedsheet
- Use a sterile glove and antiseptic or soluble gel for lubrication
 - Use the smallest glove possible to avoid friction of the extra latex from a larger glove
- Slowly position the patient to prevent hypotension- Supine position with head of the bed slightly elevated
 - Determine the following:
 - Effacement, Dilatation, Fetal Station, Presentation – head versus other presenting part, Position (Anterior/Posterior), and molding of the head
 - Status of the membranes. If membranes are ruptured – note color, amount and any odor of fluid

Vaginal Exam Procedure

- Explain findings of exam to patient and partner
- Document findings and report to provider

CONTRAINDICATIONS TO VAGINAL EXAMS

1. Vaginal Bleeding
2. Document Placental or Vasa Previa
3. Premature labor – with or without premature rupture of labor
4. Patient does not give consent

Lowdermilk (2024)

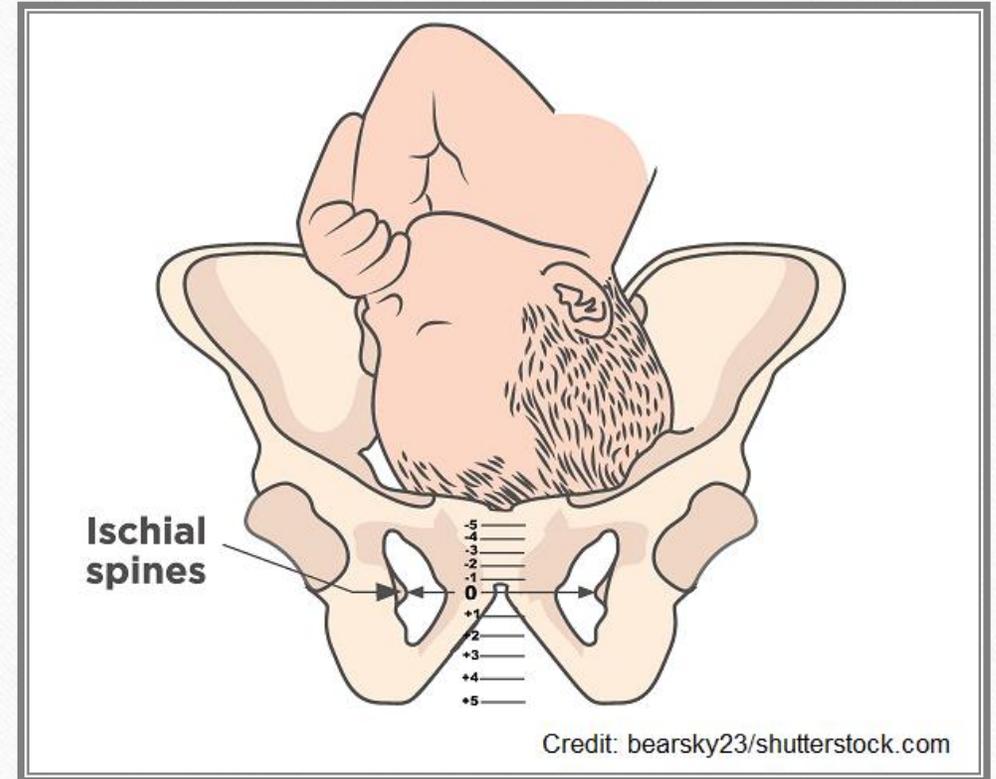
Bundle Birth Podcast # 64 “They Did NOT Just Say That!” aired June 24th, 2024

Things to Consider

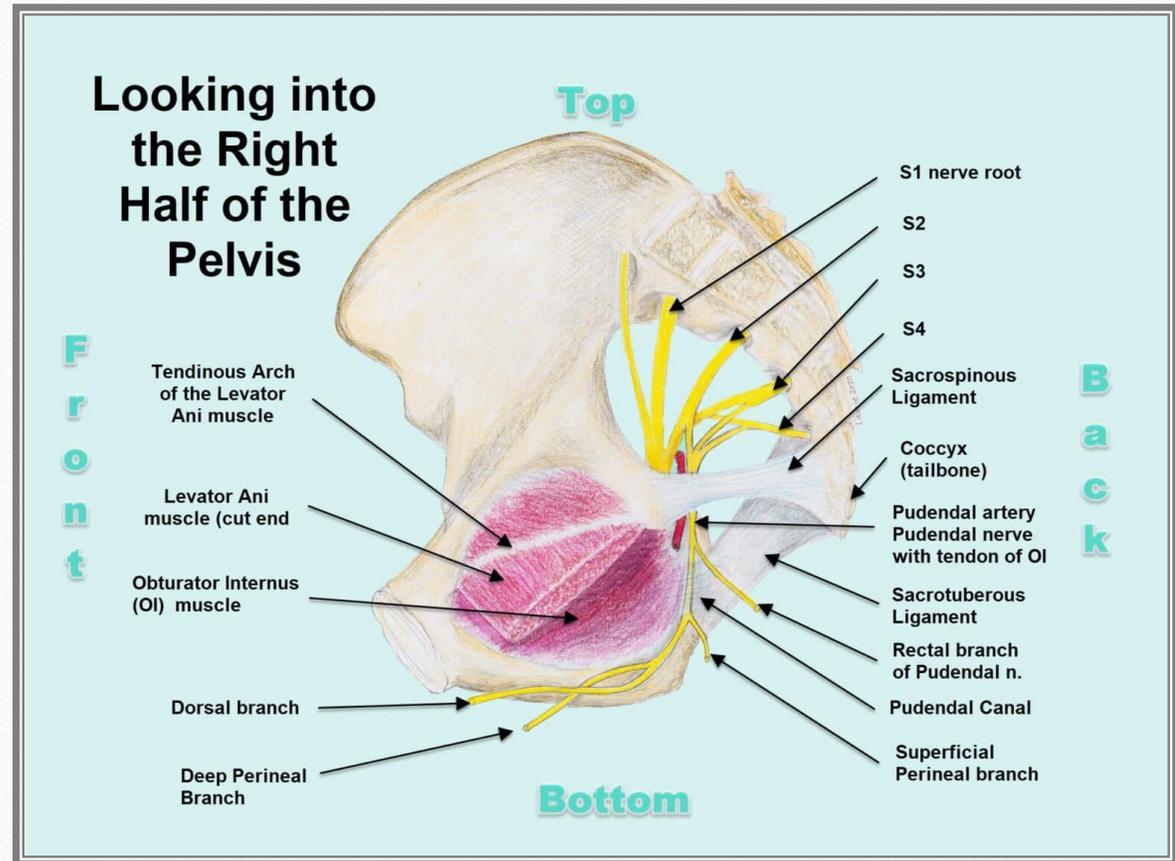
- This is an area where nurses should develop proficiency through the assistance of a skilled preceptor
- Determining fetal station and position requires more skill than dilatation and effacement.
 - To accurately determine fetal station, the ischial spines must be identified.
 - See next slide

Ischial Spines & Fetal Station

- The Ischial Spines may be identified by pressing in the sidewall of the vaginal approximately 1 inch with examining fingers at 3 and 9 o'clock
- Not necessary to identify both spines
- Note the fetal skull and do not confuse with caput or molding

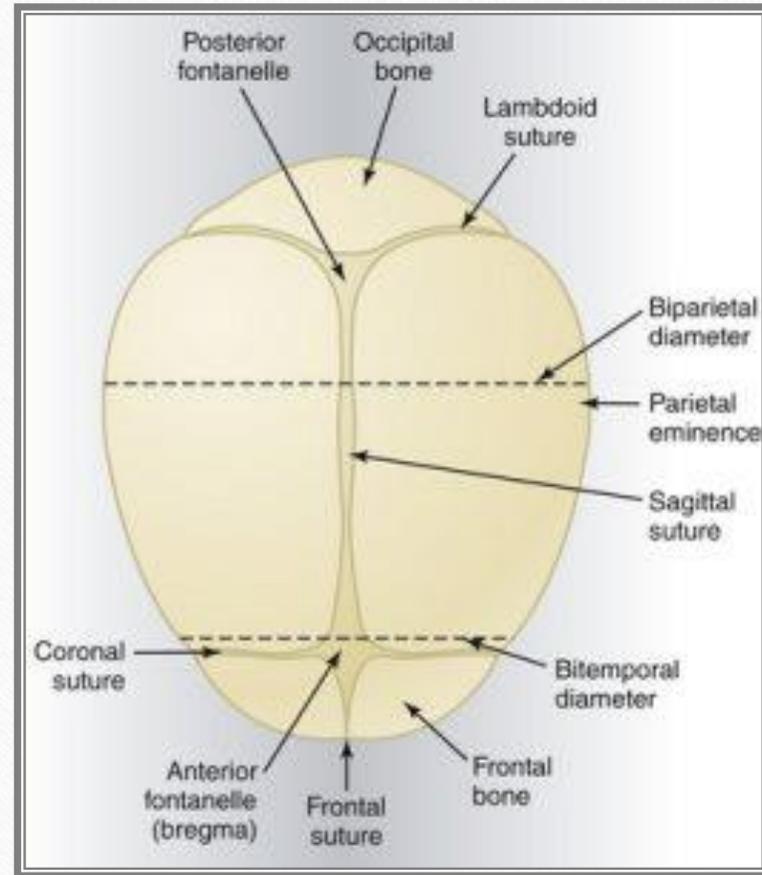


However, be mindful of the Pudendal Nerve located near the Ischial Spines



Fetal Position

- More difficult to determine position than other components of the vaginal exam
- Be familiar with the location of the fetal sutures versus the shape of the anterior or posterior fontanelle as these may be misshapen due to overriding suture or molding



<https://www.google.com/imgres?q=image%20of%20fetal%20sutures%20to%20determine%20fetal%20position&imgurl=https%3A%2F%2Fpressbooks.pub%2Fapp%2Fuploads%2Fsites%2F4272%2F2021%2F08%2Ffetal-skull-258x300.jpg&imgrefurl=https%3A%2F%2Fpressbooks.pub%2Fnu323%2Fchapter%2Fcare-of-the-normal-intrapartum-client%2F&docid=LFVriLgJxdA7BM&tbnid=kYrErSd2imv5OM&vet=12ahUKEwir64m998KGAXUkkIkEHWM6CaIQM3oECGsQAA..i&w=258&h=300&hcb=2&ved=2ahUKEwir64m998KGAXUkkIkEHWM6CaIQM3oECGsQAA>

Challenges

- When or frequency of exams?
- What if your exam is different than your colleague's or the provider's exam?
- How to address the provider when you are asked to perform an exam that you think may be unwarranted?
- How many vaginal exams are to many?

Small Group Activity

Number on Blue Case _____

Record effacement and dilatation for each small box (1-6) within the blue case

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

References

- Bundle Birth Podcast # 64 “*They Did NOT Just Say That!*” aired June 24th, 2024
- Cochran Review. (2022). *Routine vaginal examinations as compared to other methods for assessing progress of labour to improve outcomes for women and babies at term.*
- Gluck et al. (2020). *The correlation between the number of vaginal examinations during active labor and febrile morbidity, a retrospective cohort study.* BMC Childbirth and Pregnancy. Pgs. 1-6.
- Lowdermilk, D.L., Perry, S. E., Cashion, K. Alden, K. R., & Olshansky, E.F. (2024) *Maternity & Women’s Health Care.* (13th Ed.) Chapter 19, Nursing Care of the Family During Labor and Birth. St. Louis: Elsevier
- Simpson, K.R., Creehan, P.A., O’Brien-Abel, N., Roth, C.K. & Rohan, A.,J. (2021). *Perinatal Nursing.*(5th Ed.) Philadelphia: Wolters Kluwer