

Teaching to the Texts

Williams Obstetrics Chapter 21: Physiology of Labor & Chapter 22: Normal Labor

CREOG Educational Objectives

1. Evaluate the woman presenting in labor.
2. Define and describe the normal course of labor, including diagnosis and management.
3. *Define and describe abnormal labor, including diagnosis and management.*
4. *Perform and interpret intrapartum fetal monitoring.*
 - a. *Intermittent auscultation*
 - b. *Electronic fetal heart rate monitoring*
 - i. *Define normal and abnormal heart rate and variability.*
 - ii. *Define types of heart rate patterns.*
 - iii. *Describe appropriate interventions for abnormal fetal heart rate patterns.*

** Italicized points will be covered further with future chapters such as Chapter 23: Abnormal Labor and Chapter 24: Intrapartum Assessment*

Practice Questions

1. A 32-year-old now G2P2002 woman has had a successful vaginal birth after history of cesarean delivery. It has now been 30 minutes since the delivery of the infant, and there are no signs of separation. Her uterus remains boggy, and no uterotonics have been given. The estimated blood loss at this time is 250 mL. Which of the following is the primary cause of placental separation in the third stage of labor?
 - a. Autotransfusion from the uterus postpartum
 - b. Increasing serum oxytocin levels
 - c. Loss of pressure in the vascular bed from cord ligation
 - d. Shearing forces from uterine contractions
 - e. Sudden decline in progesterone levels

From: TrueLearn Question Bank

2. A 22-year-old G1P0 woman is now completely dilated at a +2 station. She does not have an epidural and complains of intense pelvic pain. The fetal station has been +2 since she started pushing. You note descent of the fetal head with each push; however, it returns to its original station each time she relaxes. Which of the following defines second-stage arrest in a nulliparous patient without an epidural?
 - a. 3 or more hours with descent but without rotation
 - b. 3 or more hours without descent but with rotation
 - c. 3 or more hours without descent or rotation
 - d. 4 or more hours without descent but with rotation
 - e. 4 or more hours without descent or rotation

From: TrueLearn Question Bank

3. A 23-year-old gravida 1 woman at 39 weeks' gestation desires a natural labor. She was advised by her obstetrician to spend the latent phase of her labor at home to minimize interventions. Upon noticing contractions every 5 to 10 minutes for the past several hours, she presents to triage for evaluation. Her cervix has changed from 1 cm in the office earlier in the week to 3 cm now. Which of the following is the MOST appropriate definition of latent labor?
- Cervical dilation at a rate of <1.5 cm per hour for multiparous women, <1.2 cm per hour for nulliparous women
 - 20 hours of labor for nulliparous women, 14 hours of labor for multiparous women
 - Regular maternal perception of contractions with a cervical dilation of <6 cm
 - Presence of adequate uterine contractions and a cervix of at least 4 cm
 - Labor in which the rate of change of cervical dilation significantly increases

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4. A 30-year-old gravida 3, para 2 woman at 38 weeks' gestation has a cervical exam of 6/80/-1. She reports that her prior delivery was complicated by a face presentation, and that after several hours of pushing, she finally delivered a "very bruised" male infant. You notify her that an infant undergoes several movements to navigate the maternal pelvis. Which of the following describes the CORRECT sequence of the cardinal movements of labor?
- Descent, engagement, flexion, external rotation, extension, internal rotation, expulsion
 - Descent, engagement, flexion, internal rotation, extension, external rotation, expulsion
 - Engagement, descent, flexion, external rotation, extension, internal rotation, expulsion
 - Engagement, descent, flexion, internal rotation, extension, external rotation, expulsion
 - Flexion, descent, engagement, internal rotation, extension, external rotation, expulsion

From: TrueLean Question Bank

High-Yield Associated Resources

- UptoDate: Physiology of Parturition
- UptoDate: Normal and Abnormal Labor Progression
- UptoDate: Management of Normal Labor and Delivery



1. Head floating, before engagement



5. Complete extension



2. Engagement; descent, flexion



6. Restitution (external rotation)



3. Further descent, internal rotation



7. Delivery of anterior shoulder



4. Complete rotation, beginning extension



8. Delivery of posterior shoulder

Image Ref: UptoDate: Management of Normal Labor and Delivery

Question answers:

1-d, 2-c, 3-c, 4-d