# 3 INTRAPARTUM CARE CONSIDERATIONS

**Knowledge Translation Toolkit** can be found **here** and includes:

- Chapter Summary
- Intrapartum Considerations (p.119)

## 1. Introduction

- Small period of time, with a large impact.
- Trauma-informed approaches are critical during this potentially triggering experience.
- Language matters; and reflective and responsive approaches are needed
- Pelvic Exams (Consent, Privacy & Dignity, and Awareness of Physical Touch)

## 2. Admission

- All pregnant persons should be screened for substance use.
- Communication is key
  - Notify all care team members upon admission
- Detailed history is imperative to develop a transparent and holistic foundation of care
  - Last opioid ingestion, it is important to continue the daily dose
  - Disposition of Carries; discuss the planned disposition of carries within your facility.

## 3. Pain Management

- OAT is not sufficient pain medication for acute pain.
- Pain in labour is complex:
  - Histories of anxiety, pain sensitivity, and tolerance
- Avoid the use of opioid antagonist medications (such as Naloxone or Naltrexone) due to the potential risk of acute withdrawal.
- Unique Anesthesia Considerations exist:
  - Epidural (early and preferred)
  - Continue daily maintenance dose
  - Puritis treatment:
    - Ondansetron NOT nalbuphine
  - Higher doses may be needed of pain medication
  - Morphine may not be as efficient in a patient who is taking buprenorphine/ naloxone.

## 4. Monitoring

- Monitor for signs of sedation after administering opioids for acute labour pain
- cEFM should be considered when perinatal risk factors are present
- Monitor pregnant person for signs of withdrawal (especially if labour and birth span over days)
- Discuss what support is available for the newborn if needed (e.g. respiratory distress)
- **Naloxone and Birth:**
  - **The use of naloxone in newborns born to pregnant persons prescribed OAT/ diagnosed with OUD is contraindicated as naloxone can potentially lead to acute opioid withdrawal.**

**Chapter Summary**