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**A POCKET
GUIDE TO**

Clinical Midwifery

THE EFFICIENT MIDWIFE

SECOND EDITION



JONES & BARTLETT
LEARNING



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Composition: S4Carlisle Publishing Services

Cover Design: Kristin E. Parker
Text Design: Michael O'Donnell
Rights Specialist: John Rusk
Media Development Editor: Troy Liston
Cover Image: © Binsik/iStock/Getty Images;
© Ekaterina Bedoeva/iStock/Getty Images
Printing and Binding: McNaughton & Gunn
Cover Printing: McNaughton & Gunn

Library of Congress Cataloging-in-Publication Data

Names: Dutton, Lauren A., author. | Densmore, Jessica E., author. | Turner, Meredith B., author.

Title: A pocket guide to clinical midwifery : the efficient midwife / Lauren Dutton, Jessica Densmore, Meredith Turner.

Description: Second edition. | Burlington, Massachusetts : Jones & Bartlett Learning, [2020] | Includes bibliographical references and index.

Identifiers: LCCN 2018044208 | ISBN 9781284152814 (pbk.)

Subjects: | MESH: Midwifery | Handbooks

Classification: LCC RG950 | NLM WQ 165 | DDC 618.2-dc23

LC record available at <https://lcn.loc.gov/2018044208>

6048

Printed in the United States of America

23 22 21 20 19 10 9 8 7 6 5 4 3 2 1

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PREFACE

A Pocket Guide to Clinical Midwifery was conceived while the three authors were in midwifery school at Yale University School of Nursing. As new midwifery students, we were instructed to create a “black book” that would provide a quick reference to critical topics in midwifery practice. As we entered clinical practice, this resource proved to be invaluable because it kept everything at our fingertips while seeing patients.

We now work in diverse practice settings and bring different perspectives to every topic. Our patient populations, work environments, and clinical expertise are all different and yet we all continue to rely on the essentials of midwifery every day. It was clear that an update was needed as we reflected on how our practices have evolved to meet the needs of the people we serve and current evidence-based practice guidelines.

We are excited that this pocket guide will be paired with a mobile app. The printed text is the foundation but we want to make sure you always have the information you need at your fingertips. Our goal for the app is to include as many tools as possible so that one app will meet all your clinical needs.

Without the guidance of our mentors in both midwifery school and clinical practice, this book would not have been possible. We offer heartfelt thanks to those brilliant grand-midwives before us who instilled in us the importance of practicing evidence-based medicine each and every day. We dedicate this book to our students who keep us fresh and energized and thank the families we serve for keeping us humble, grounded, and in love with midwifery.

Hallmarks of Midwifery

Recognition of menarche, pregnancy, birth, and menopause as normal physiologic and developmental processes

Advocacy of non-intervention in normal processes in the absence of complications

Incorporation of scientific evidence into clinical practice

Promotion of woman- and family-centered care

Empowerment of women as partners in health care

Facilitation of healthy family and interpersonal relationships

Promotion of continuity of care

Health promotion, disease prevention, and health education

Promotion of a public healthcare perspective

Care to vulnerable populations

Advocacy for informed choice, shared decision making, and the right to self-determination

Integration of cultural humility

Incorporation of evidence-based complementary and alternative therapies in education and practice

Skillful communication, guidance, and counseling

Therapeutic value of human presence

Collaboration with other members of the interprofessional healthcare team

Reproduced from American College of Nurse-Midwives. (2012). Core competencies for basic midwifery practice. Retrieved from <http://www.midwife.org/ACNM/files/ACNMLibraryData/UPOLOADFILENAME/000000000050/Core%20Competencies%20Dec%202012.pdf>.

INTRODUCTION

Our goal is to consolidate information you need during a busy clinical day into one compact reference. We realize that information in midwifery and obstetrics will change, but this book provides an overview of topics midwives and women's health providers commonly encounter. The information on each topic is thoughtfully condensed to fit onto as few pages as possible.

Although many obstetrical and gynecological reference guides are organized by patient care (prenatal, well-woman, etcetera), this resource is presented alphabetically so that the topic of interest can be found quickly. There are a few categories where multiple topics can be found: breastfeeding, contraception, labor, and newborn. These categories were made to keep similar information close to each other within the text for easier comparison.

Additionally, we have included with each topic the resources needed to practice evidence-based medicine. We also regularly reference many of the core midwifery texts that we did not put on each page but are referenced below. These common references include *Varney's Midwifery*, *Pharmacology for Women's Health*, *Women's Gynecologic Health*, *Primary Care of Women*, and *Tarascon Pharmacopoeia*.

Each topic includes the foundational information you need to get started with a basic understanding and a management plan. For medications listed we have put a common selection along with considerations. For a complete list, and for detailed information on pregnancy and lactation please consult a current up-to-date drug resource. We have included commonly used abbreviations in a list for reference. As new research is done some of the guidelines listed in this text may change so it will be important for you to stay up to date with the protocols in your practice, region, and current evidence-based practice.

Now you can take your copy of **A Pocket Guide to Clinical Midwifery, Second Edition** wherever you go with a new app for Android, iPhone, and iPad. The app contains exclusive content, calculators, and more. Look for this icon throughout the text where you can learn even more with the app.



References

Please see each topic for the sources specific to that topic. The following references were consistently used throughout this work.

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ABBREVIATIONS

- ACNM: American College of Nurse-Midwives
ACOG: American College of Obstetricians and Gynecologists
AFI: amniotic fluid index
AIDS: acquired immune deficiency syndrome
ALT: alanine aminotransferase
AMH: anti-Müllerian hormone
AROM: artificial rupture of membranes
AST: aspartate aminotransferase
AUB: abnormal uterine bleeding
BMI: body mass index
BP: blood pressure
bpm: beats per minute
BPP: biophysical profile
BV: bacterial vaginosis
CBC: complete blood count
CDC: Centers for Disease Control and Prevention
CMP: complete metabolic panel
CMV: cytomegalovirus
D&C: dilation and curettage
dL: deciliter
DSM-5: *Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition*
EFW: estimated fetal weight
FDA: U.S. Food and Drug Administration
FHR: fetal heart rate
FSH: follicle-stimulating hormone
g: grams
GBS: Guillain-Barré syndrome
GI: gastrointestinal
HbA1c: hemoglobin A1c
hCG: human chorionic gonadotropin
HDL: high-density lipoproteins
HELLP: hemolysis, elevated liver enzymes, low platelets
HIV: human immunodeficiency virus
HPV: human papillomavirus
HSV: herpes simplex virus
IM: intramuscular
IUD: intrauterine device
IUFD: intrauterine fetal demise
IUGR: intrauterine growth restriction

xii Abbreviations

IUPC:	intrauterine pressure catheter
IV:	intravenous
kg:	kilogram
lbs:	pounds
LDL:	low-density lipoproteins
LFT:	liver function test
LH:	luteinizing hormone
LLQ:	left lower quadrant
LUQ:	left upper quadrant
mg:	milligram
mIU:	milli-international units
mm:	millimeter
MRI:	magnetic resonance imaging
NSAID:	nonsteroidal anti-inflammatory drug
NST:	nonstress test
OTC:	over the counter
PCOS:	polycystic ovary syndrome
PET:	positron emission tomography
PO:	orally
PR:	by rectum
PrEP:	preexposure prophylaxis
PT:	prothrombin time
PTT:	partial thromboplastin time
PUPPP:	pruritic urticarial papules and plaques of pregnancy
PV:	per vagina
RBC:	red blood cell
RLQ:	right lower quadrant
RUQ:	right upper quadrant
Rx:	prescription
SNRI:	serotonin–norepinephrine reuptake inhibitor
SROM:	spontaneous rupture of membranes
SSRI:	selective serotonin reuptake inhibitor
STI:	sexually transmitted infection
T4:	thyroxine
TOLAC:	trial of labor after cesarean
TORCH:	toxoplasmosis, other agents, rubella, cytomegalovirus, herpes simplex
TSH:	thyroid-stimulating hormone
USMEC:	U.S. Medical Eligibility Criteria for Contraception
UTI:	urinary tract infection
VBAC:	vaginal birth after cesarean
VLDL:	very-low-density lipoproteins
WBC:	white blood cell