

Notes and commentary on the Observation of deliveries Questionnaire On the Management of the Third Stage of Labor

Below are notes and commentaries on individual questions in this questionnaire. These commentaries are meant to help data collectors better understand why and how these questions are to be asked.

Q#105: Make sure and use the same series of codes to identify the facilities in the sample that you have used in the facility questionnaire and dataset.

Q#106: The response codes for this question will almost certainly need to be adapted to your country. For example, you may want to include additional codes for private facil

Q#107: The response codes for this question will almost certainly need to be adapted to your country.

Q#109: The age of the woman can be obtained from the labor and delivery logbook.

Q#110: Gravidity is the total number of pregnancies the woman has had. If this is her first pregnancy, gravidity should be recorded as 1.

Q#111: Parity is the number of deliveries, ie, stillbirths and live births, a woman has had before the delivery you are observing. If this is her first pregnancy, her parity would be coded as 0.

Q#113: If a woman has been induced to start labor, and later an additional uterotonic drug is administered during the 2nd stage of labor, you should record both Q#112 (INDUCED) and Q#113 (YES TO AUGMENTATION) as 1.

Q#115: Use the 24 hour clock to record your answer. For example 8:35am would be recorded as 08 in the boxes for HR and 35 in the boxes for MIN.

Q#116: Use the 24 hour clock to record your answer. If the cord is clamped in less than one minute, you may leave the HR and MIN boxes empty and circle code 01 for LESS THAN ONE MINUTE.

Q#117: This is a very important question. The answer to this question determines whether the woman received *any uterotonic* drugs during the third or fourth stages of labor (that is, at any time during or after delivery of the baby. This question excludes any uterotonic drug she may have received or induction or augmentation purposes). If you are sure that she received no uterotonic drugs during or after delivery of the baby, circle code 2 (NO) and skip to Q#136.

Q#118: Use the 24 hour clock to record your answer.

Q#119: This question asks specifically if *oxytocin* was administered to the woman at some point during or after the delivery of the baby.

Q#132: If prostaglandins were administered to the woman (and recorded in Q#131), type the generic name of the drug administered. Circle code 1 if the name is MISOPROSTOL, or write in the name on the line provided and circle code 8 (OTHER PROSTAGLANDIN).

Q#139: This question asks if traction was applied to the cord while awaiting the placenta. Realistically, it may be only the provider who can know for sure if traction is being applied. However, if the cord is not taut we know that traction is not being applied. Verify that the cord is taut between the vagina and the hand of the provider and respond accordingly.

Q#142: Use the 24 hour clock to record your answer.

Q#144: This question asks whether the uterus was palpated at least twice during the 30 minutes following delivery of the placenta. Palpation is used to assess the continued need for further massage. Answering this question requires you to remain with the woman for 30 minutes following delivery of the placenta.

Section 2: This section records the drugs that are available and accessible on the maternity unit and also documents the storage conditions of drugs and supplies on this unit.

This section includes questions on five uterotonic drugs and two types of supplies (syringes and needles, both required for use of AMTSL). Questions are to be asked row by row. Thus, the questions A-E in row Q#201 all pertain to oxytocin. Complete the response to Q#201A-E, before continuing on to Q#202A-E on ergometrine. Continue in the same manner to complete Q#203-205

Q-A: Is it available on the trolley? Question A wants to know if the drug is easily available. If a drug is set out on the trolley before the delivery, this suggests that administration of uterotonics is common and expected. In some cases, there may be no trolley, only a medicine tray or a counter that is near by. However, trays and counters that are close by serve the same purpose as a trolley.

Q-B: Some amount of uterotonic drugs are usually stored on the maternity unit. Check to see if there is a stock of uterotonic drugs stored on the maternity unit.

Q-C: This question asks if the uterotonic drug is stored in a cooler. This may be a refrigerator or a cooler. The purpose of this question is to document whether drugs on the maternity unit are being kept cool, or stored at room temperature. If the uterotonic drug is not available on the maternity unit, circle code 3 (NOT AVAILABLE).

Q-D: This question asks if the uterotonic drugs are protected from light while they are being stored on the maternity unit. Drugs may be stored in the dark, or in daylight, but away from direct sunlight, or in direct sunlight. If the uterotonic drug is stored under conditions not listed on the questionnaire, circle code 4 (OTHER). If the uterotonic drug is not available on the maternity unit, circle code 5 (NOT AVAILABLE).

Q-E: This question asks you to count the number of ampoules or tablets for each uterotonic drug which is stored on the maternity unit. Enter 0 if there is none available.

NOTE: Questions C and D for Q#206-207 are not applicable for syringes and needles and have been blacked out of the questionnaire.