

## **Transfer to hospital after prolonged second stage of labour (07HDC16053, 10 June 2008)**

*Midwife ~ Second stage of labour ~ Delay in transfer to secondary care ~ Conflict of midwifery and obstetric expert opinion ~ Documentation*

A young woman complained about the management of her labour by her midwife. The woman, in the 41st week of her first pregnancy, was admitted in labour to a small rural maternity unit by her midwife. Six and a half hours later, at 10.45am, after a prolonged second stage of labour, the midwife arranged for the woman to be transferred to the public hospital's maternity unit by ambulance. The woman was admitted to the hospital at 1.45pm. Her baby was delivered by a difficult emergency Caesarean section at 3.15pm with severe bruising to his brow and face, and a crush injury to his nose.

It was held that although the midwife's documentation did not meet professional standards, she met professional midwifery standards in her management of the labour and the timing of the decision to transfer to a public hospital, and was found to have provided services of an appropriate standard under the Code.

ACC accepted that the baby had suffered a "treatment injury" on the basis of obstetric advice that delays by the midwife constituted an "error in management". This case highlights the different philosophy and practice of obstetricians (who take a risk-averse, interventionist approach) and midwives (who take a less interventionist approach, to allow the normal physiological process of labour to proceed).

Midwives and obstetricians working as lead maternity carers should spell out to women their own philosophy of care in the event of delay or difficulties during labour, so that women are better informed and able to make a choice about which approach they want.