Appendix M
Spontaneous Labor Algorithm

If Maternal or Fetal Medical Indication for Admission: DO NOT USE THIS ALGORITHM

Triage

- Spontaneous Labor
- Intact membranes
- Stable Mother and Baby
- Term, Singleton, Vertex (TSV)

For Induction of Labor: See Induction Algorithm (if enters active phase, follow arrow)

Cervix ≥ 4 cm & in Labor.
*Note: special circumstances such as severe fatigue, multiple triage visits, prolonged latent phase, and difficulty coping may warrant admission before 4 cm.

Home

Walk and Reassess

Admit to L&D

Adequate Progress First Stage

Inadequate Progress First Stage

Depending on assessment; Home, AROM and/or Oxytocin, or Cesarean
(ACOG criteria for Arrest of Labor: at least 6 cm dilation with ruptured membranes, AND at least 4 hours of adequate contractions without cervical change OR 6 hours of oxytocin with inadequate contractions and no cervical change)

Inadequate Progress Second Stage

AROM and/or Oxytocin if not already done

Operative Delivery or Cesarean Delivery
(ACOG criteria for 2nd Stage Arrest: at least 3 hours of pushing for nulliparas, at least 4 hours of pushing for nulliparas with epidural; at least 2 hours of pushing for multiparas, at least 3 hours of pushing for multiparas with epidural)

Adequate Progress

Adequate Progress Second Stage

Vaginal Delivery

Adapted with permission from Washington State Hospital Association