



Family Centered Cesareans

Created by the ICAN Board of Directors



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Who is ICAN?



Athens, Greece



Indonesia



Portland, Oregon



Dominican Republic

The International Cesarean Awareness Network is a non-profit organization whose mission is to improve maternal-child health by reducing preventable cesareans through education, supporting cesarean recovery, and advocating for vaginal birth after cesarean (VBAC).





Family Centered Cesareans

A Family Centered Cesarean or Gentle Cesarean can include many features, but its overall purpose is to invoke a peaceful, calm atmosphere that closely mimics what happens during and immediately after a vaginal childbirth. Many of these options are possible in unscheduled cesareans.

- Options may include but are not limited to:
 - Clear drapes
 - Extra support person (e.g. partner AND doula, or birth photographer)
 - Unrestrained arms
 - No sedation, only numbing
 - Immediate skin to skin - if mom and baby are stable
 - Music of your choice
 - Immediate breastfeeding - if mom and baby are healthy
 - Baby stays with you in the operating room, and in recovery

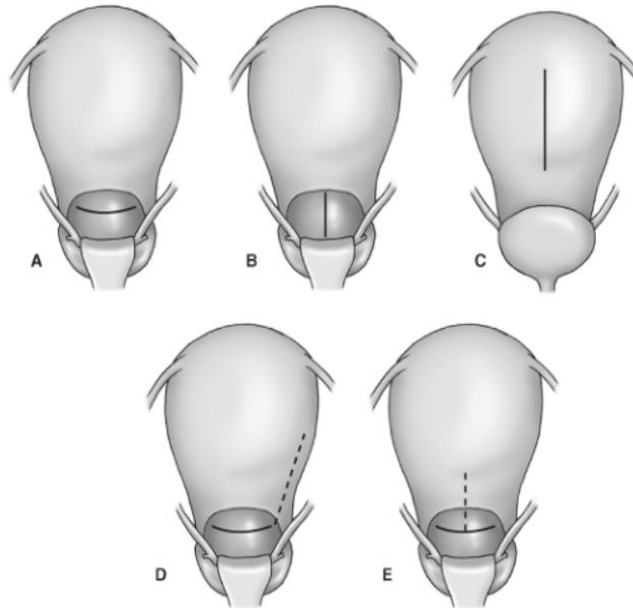


Fig. 3. Uterine incisions for cesarean delivery. **A:** Low-transverse incision. The bladder is retracted downward, and the incision is made in the lower uterine segment, curving gently upward. If the lower segment is poorly developed, the incision can also curve sharply upward at each end to avoid extending into the ascending branches of the uterine arteries. **B:** Low-vertical incision. The incision is made vertically in the lower uterine segment after reflecting the bladder, avoiding extension into the bladder below. If more room is needed, the incision can be extended upward into the upper uterine segment. **C:** Classic incision. The incision is entirely within the upper uterine segment and can be at the level shown or in the fundus. **D:** J incision. If more room is needed when an initial transverse incision has been made, either end of the incision can be extended upward into the upper uterine segment and parallel to the ascending branch of the uterine artery. **E:** T incision. More room can be obtained in a transverse incision by an upward midline extension into the upper uterine segment.

Types of Incisions

<https://basicmedicalkey.com/cesarean-delivery/>

Benefits of RCS

Some individuals may feel the benefits of a planned repeat cesarean delivery to include:

- Scheduled birth
- No labor
- Knowing what to expect
- Sexual assault/abuse survivors may feel a sense of control when birthing via planned cesarean
- Lower risk of Uterine Rupture
- Cesareans may carry less risks for certain medical conditions.

SOURCE: ACOG Practice Bulletin #205, Vaginal Birth After Cesarean

Risks of RCS

Increased Risk For:

- Blood transfusion
- Infection
- Injury to organs
- Uterine Rupture
- Blood Clots
- Hysterectomy
- Death
- Injury to baby
- Placental abnormalities in subsequent pregnancy(s)
- Hernia

Family Centered Cesareans



Photos by
Tracy Abney

Family Centered Cesareans



Photo credit:
Megan and David Calvert



Birth Plans

- You are encouraged to create and discuss your birth plan at your first prenatal appointment, or even before pregnancy!
 - And to continue discussing with your provider(s) frequently
- Make it fit on one page (or a poster!)
 - Use words like “I will be” and “In the event of a medically necessary ...”
- You should give a copy to your provider(s), doula (if you have one), partner, and nurse

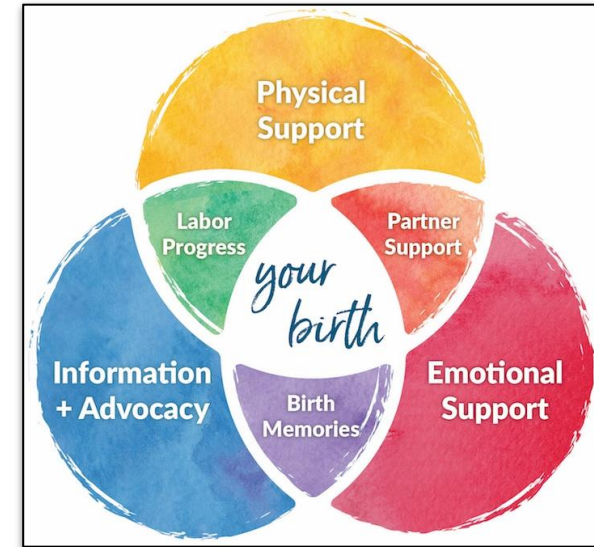




Doulas

- Can provide prenatal education, labor, birth, & postpartum support
 - Studies show the most effective tool to improve labor and delivery outcomes is the presence of a continuous support person
- Doulas are beneficial in vaginal AND cesarean births!
- Do NOT provide medical assistance
- www.doulamatch.net is an excellent resource
- Clients should take a copy of their doula contract to the hospital. Many states have laws preventing businesses from interfering in private contracts. Research the laws for your state and share with your members. You can also look for an attorney that would be willing to present at a meeting on this topic.

<https://birthkalamazoo.com/birth-doulas/>

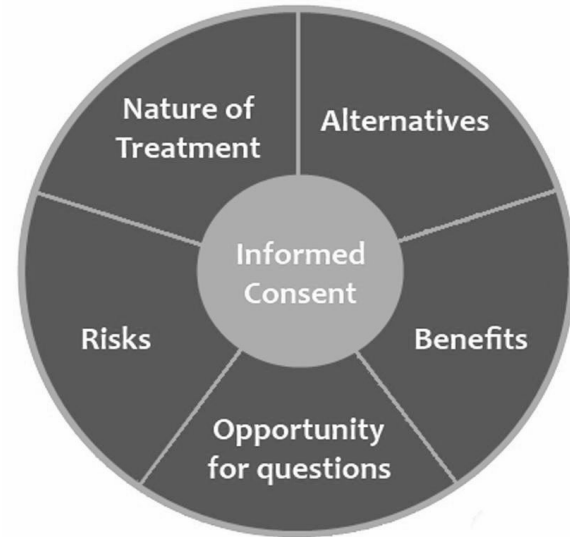




Your Rights

- The pregnant person is the biggest part of the healthcare “team”
- You have the right to informed decision making
- **Informed Consent**
 - means you were given an unbiased discussion on all of the benefits, risks, and alternatives of the proposed treatment/procedure, and you *freely chose to consent*
- **Informed Refusal**
 - means you were given an unbiased discussion on all of the benefits, risks, and alternatives of the proposed treatment/procedure, and you *freely chose to refuse* the treatment/procedure

<https://understandingmyositis.org/informed-consent/>



“Pregnancy is not an exception to the principle that a decisionally capable patient has the right to refuse treatment, even treatment needed to maintain life. Therefore, a decisionally capable pregnant woman’s decision to refuse recommended medical or surgical interventions should be respected”

- [ACOG Committee Opinion: Refusal of Medically Recommended Treatment During Pregnancy](#)



- The use of coercion is ethically impermissible.
- You have the right to change providers, even on the day of delivery.
- You have the right to revoke consent at ANY time.
- Consent forms from the hospital or provider are **NOT** contracts, and they are **NOT** a replacement for a true informed consent discussion.

Questions?

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