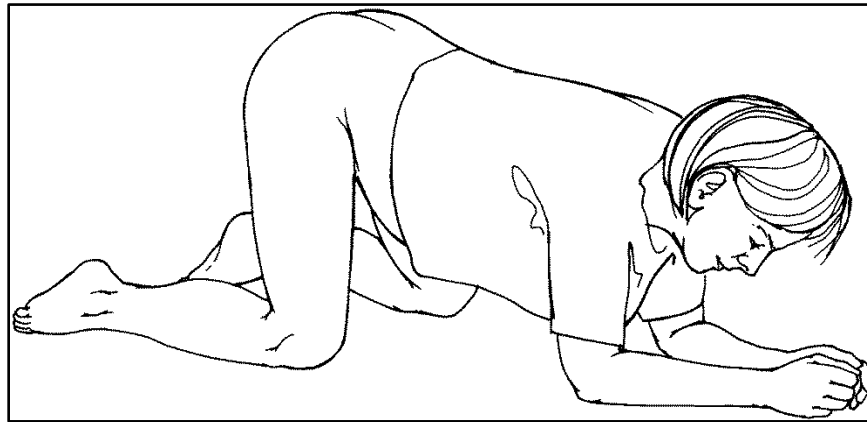
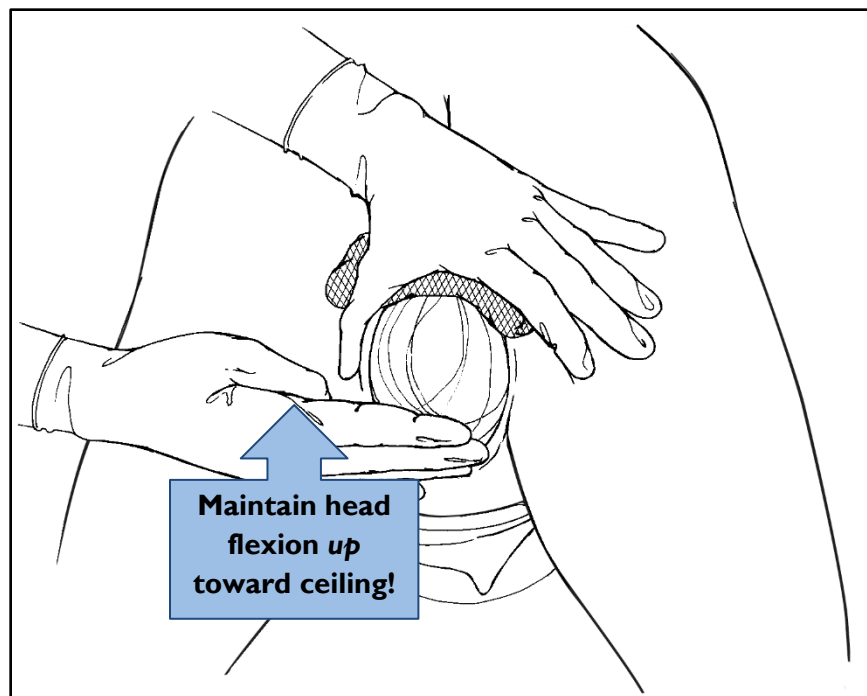


# Instructions and pictures on how to facilitate birth in hands-knees position

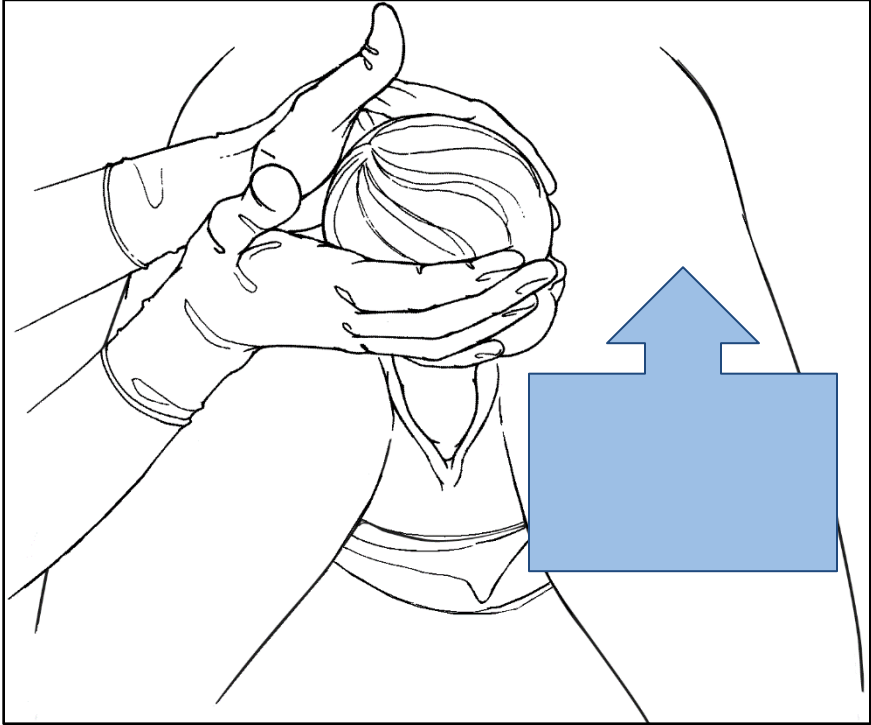


- Place a drape under the woman's abdomen instead of her buttocks (buttocks will be in the air).
- Talk to the woman continually because she cannot see your face. Explain what you are doing. Encourage and support her.
- During a contraction, the head usually advances well. Ask the woman to focus on deep breathing and to give only small pushes if she has an uncontrollable urge to push.
- Control birth of the head with fingers of one hand (**palm up**) to maintain flexion of the head **upward** (toward the maternal anus), allowing natural stretching of the perineal tissue. Wipe away any fecal material as needed with a swab/moist towel.

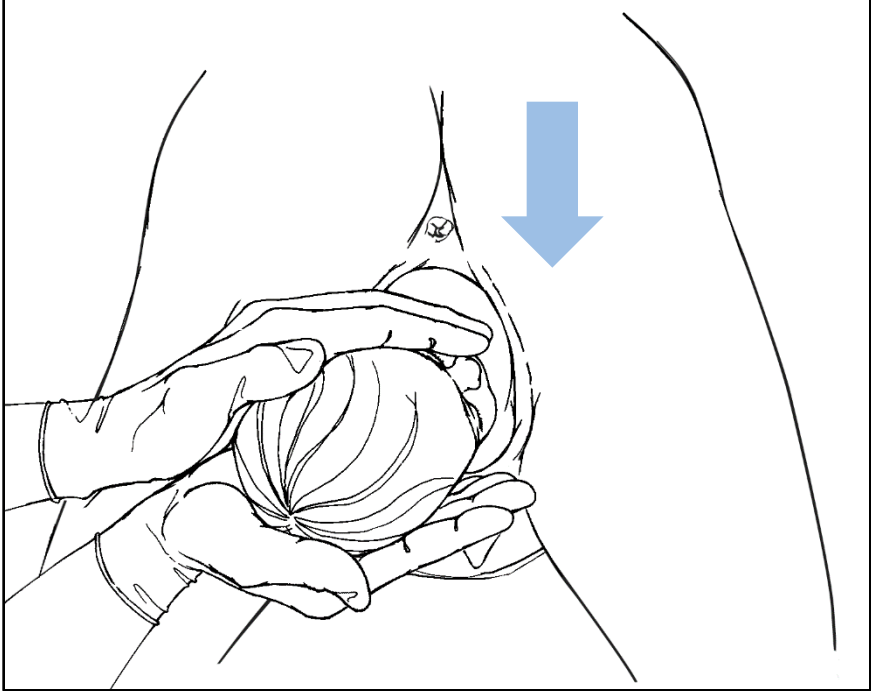


- Remember, the baby's face will be looking at the ceiling when it appears. Feel around the baby's neck for the cord and respond appropriately if the cord is present.

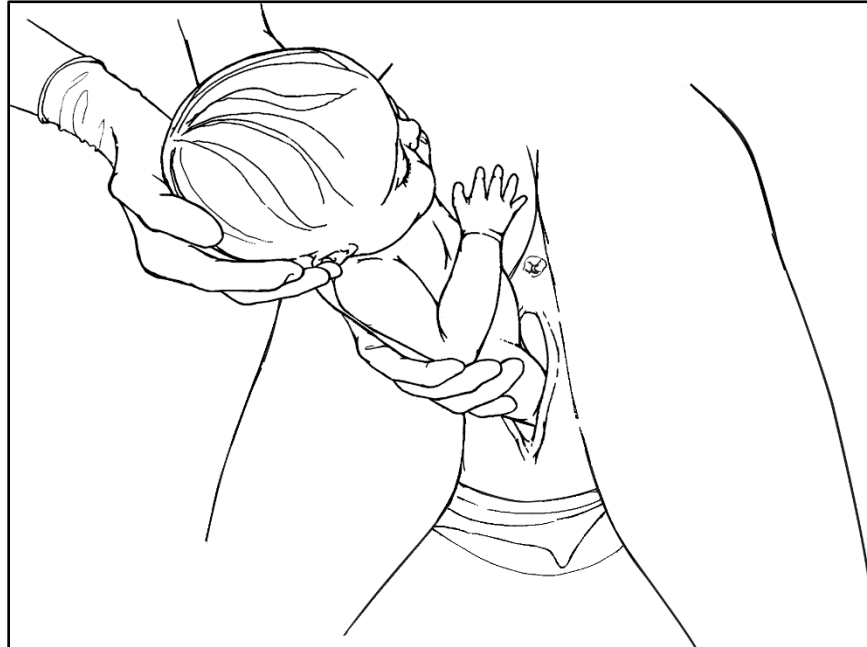
- Allow the baby's head to turn spontaneously and, with your hands on either side of the baby's head, deliver the first shoulder **upward** away from the floor and toward the ceiling.



- To deliver the second shoulder, move the baby's head in a posterior direction. When the axillary crease is seen, guide the head **downward** as the second shoulder is born over the perineum.



- Support the rest of the baby's body with one hand as it slides out and wrap the baby quickly in a clean, dry towel as you check that the baby is breathing.
- If there is space, the mother can reach down and assist with the birth of the body toward her abdomen.



## After the infant is delivered

- The newborn can be passed to the woman through her legs while the midwife maintains a secure hold of the baby until the mother has a firm grasp. Be careful of the umbilical cord to avoid unnecessary tension on it.
- The midwife can then move to face the woman and help her to sit down on a clean sheet with pillows/ her companion supporting her.
- Thoroughly dry the baby, remove the wet towel, cover with a clean, dry cloth, and assess breathing.
- Ensure that the baby is kept warm and in skin-to-skin contact on the mother's chest.
- Palpate the mother's abdomen to rule out the presence of additional baby(ies) and proceed with active management of the third stage and other components of routine care.