



Addressograph

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Vaginal Birth After Caesarean Section (VBAC) Discussion & Record Form

For use with one previous Lower Segment Caesarean Section (C/S) only

Discussion with Community midwife from 20/40		
Likelihood of: (Discussed: Tick)	Overall	
Successful VBAC (one previous caesarean delivery, no previous vaginal birth)	3 out of 4 or 72-75%	<input type="checkbox"/>
Successful VBAC (one previous delivery, at least one previous vaginal birth)	Almost 9 out of 10 or up to 85-90%	<input type="checkbox"/>
Chance of EMC/S in labour	25%	<input type="checkbox"/>
Unsuccessful VBAC more likely in: Induced labour, no previous vaginal delivery, body mass index (BMI) greater than 30 and previous caesarean for labour dystocia. If all of these factors are present, successful VBAC is achieved in 40%		
Likelihood of:	VBAC	Elective Repeat Caesarean Section (ERCS)
	Maternal	
Uterine rupture	5 per 1000 / 0.5%	<2 per 1000 / 0.2% <input type="checkbox"/>
Blood transfusion	2 per 100 / 2%	1 per 100 / 1% <input type="checkbox"/>
Endometritis	No significant difference in risk <input type="checkbox"/>	
Significant complications in future pregnancies	Not applicable if successful VBAC	Increased likelihood of placenta praevia / morbidity adherent placenta <input type="checkbox"/>
Maternal mortality	4 per 100,000 / 0.004%	13 per 100,000 / 0.013% <input type="checkbox"/>
	Fetal / newborn	
Transient respiratory morbidity	2-3 per 100 / 2-3%	4-6 per 100 / 4-6% (risk reduced with corticosteroids, but there are concerns about potential long-term adverse effect(s)) <input type="checkbox"/>
Antepartum stillbirth beyond 39 ⁺⁰ weeks while waiting spontaneous labour	10 per 100,000 / 0.1%	Not applicable <input type="checkbox"/>
Hypoxic ischaemic encephalopathy (HIE)	8 per 10,000 / 0.08%	<1 per 10,000 / <0.01% <input type="checkbox"/>
Information leaflet(s) provided:	RCOG VBAC <input type="checkbox"/> 	If planning C/S - Trust having a C/S video <input type="checkbox"/> 
Discussed:		
Continuous electronic fetal monitoring recommended at the onset of regular uterine contractions		<input type="checkbox"/>
Recommended to give birth on the obstetric unit (CLU)		<input type="checkbox"/>
Other complexities e.g. multiple births, fetal macrosomia, increased maternal age etc. Please refer to obstetrician for counselling. Care outside guidelines: refer to birth options service		<input type="checkbox"/>

Woman / birthing person's wishes, discussions:			
Management plan in the event of:			
Preterm labour (<37 ⁺⁰ weeks)	VBAC <input type="checkbox"/>	Emergency caesarean delivery <input type="checkbox"/>	
Spontaneous labour before ERCS date:	VBAC <input type="checkbox"/>	Urgent caesarean delivery <input type="checkbox"/>	
Signature		Name	
Date		Designation	

For senior obstetric discussion by 36/40			
No spontaneous labour after 39 weeks:			
Membrane sweep <input type="checkbox"/>	Induction of labour with balloon <input type="checkbox"/>	Elective C/S <input type="checkbox"/>	
Risks of IOL discussed with mother: If previous C/S, stillbirth risk after 39 weeks is 1.5-2 fold higher (0.11% vs 0.05%) compared to risk with no previous C/S.			<input type="checkbox"/>
Mechanical balloon induction available but we do not offer prostaglandins			
Discussed use of oxytocin in labour: Associated with increased risk of C/S and two to three fold risk of uterine rupture			<input type="checkbox"/>
Balloon induction booking details: Gestation planned: IOL Booked <input type="checkbox"/>		ERCS booking details: Consent completed <input type="checkbox"/>	TCI card <input type="checkbox"/>
Woman / birthing person's wishes, additional comments:			
Signature		Name	
Date		Designation	

Two previous C/S individualised discussion with senior obstetrician			
Details of previous surgery reviewed <input type="checkbox"/>	Success rate 71.1% (spontaneous labour no previous vaginal birth) <input type="checkbox"/>		
History of previous scar rupture and classical incision excluded <input type="checkbox"/>	Uterine rupture rate increased: 1.3% (vs 0.5%) <input type="checkbox"/>		
Individualised assessment of risk factors <input type="checkbox"/>	Blood transfusion rate and hysterectomy rate increased <input type="checkbox"/>		
Give birth in obstetric unit with immediate access to surgical birth (CLU) <input type="checkbox"/>			
Signature		Name	
Date		Designation	