

Trial of Labor After Cesarean (TOLAC) Checklist (05/01/17)

Instructions: Accountable OB Provider and Nurse will complete this Checklist Prior to the initiation of a Trial Of Labor After Cesarean (TOLAC)

OB Provider Section

Patient Selection Criteria (may be initiated in OB Provider's office):

a	Patient has had two or fewer previous low transverse cesarean deliveries. Records of prior births, if available, have been reviewed by the OB	Meets	Does Not Meet
b	Provider, including type of cesarean birth. (Reasonable attempts should be made to obtain the patient's medical records)	Meets	Does Not Meet
c	Patient has no history of prior uterine rupture or other uterine surgeries such as hysterotomy or myomectomy entering the uterine cavity	Meets	Does Not Meet
d	Patient has a confirmed low-vertical or low transverse scar without inverted "T" extension (If the type of previous uterine incision is unknown, there is no clinical suspicion of a previous classical uterine incision)	Meets	Does Not Meet
e	Patient has confirmed single fetus	Meets	Does Not Meet
	OR		
e	If twins, patient with one previous cesarean delivery with a low transverse incision, who is otherwise an appropriate candidate for twin vaginal delivery	Meets	Does Not Meet
f	Patient has a confirmed and documented clinically adequate pelvis for vaginal delivery	Meets	Does Not Meet

OB Provider Signature:

Date:

Time:

If there are any "Does Not Meet" responses. Do Not Proceed with a Trial of Labor

OB Provider Section Upon Patient's Arrival to Unit

	Patient Meets All Selection Criteria (a-f above)- IF NOT, DO NOT PROCEED WITH TRIAL OF LABOR	Yes	No
1	Patient has confirmed vertex presentation at onset of trial of labor	Yes	No
2	On admission, the patient's risk level has not changed	Yes	No
3	On admission, I reviewed the risks and benefits with the patient before proceeding with a Trial of Labor	Yes	No
4	I have documented that TOLAC Consent and Brochure has been reviewed and questions answered	Yes	No
5	Anesthesia provider consult is complete within 2 hours following admission	Yes	No
6	If OB Provider cannot perform C-Section, prior to this trial of labor, consultation with a physician privileged to perform a C-Section has been completed.	Yes	No

7	C-Section Provider is on site	Yes	No
8	I understand that oxytocin may be used: Begin at 1-2 milliunits per minute and gradually increase by 1 to 2 milliunits per minute no more frequently than every 30 minutes until adequate progress of labor is established and/or contractions are every 2 to 3 minutes.	Yes	No
9	I understand that I may not use prostaglandin agents during trial of labor	Yes	No
10	I have completed my admission orders for this patient's trial of labor	Yes	No
11	I have completed a history and physical and it is available on the record	Yes	No
12	There is a plan for analgesia and anesthesia for this patient	Yes	No

Document when each member of the team was notified and when each arrived in L&D. If 24 hour in-house team members available, it is not necessary to document arrival time except for arrival of attending physician.

		Nurse/OB	Provider Section	Time/Date notified	Time/Date arrived (if 24 hr. in-house staff available enter N/A)	Initials
1	OR team including circulator and scrub nurse/tech notified of admission and on-site	Yes	No			
2	NRP resuscitation team is on-site and immediately available at bedside when notified	Yes	No			
3	Pediatric/Neonatology provider notified of admission (only required on site if NRP resuscitation team NOT on site)	Yes	No			
4	Anesthesia provider notified and on-site	Yes	No			
5	Attending physician (or designee) notified and on-site	Yes	No			
6	If OB Provider not privileged to perform C-Section, a physician privileged to perform C-Section notified and on-site	Yes	No			
7	In-house Obstetrician notified and on-site (if facility staffs with in-house OB)	Yes	No			
8	I have confirmed that the TOLAC consent is signed by patient and physician	Yes	No			
9	Patient has 18 gauge or larger IV in place if patient's anatomy allows placement	Yes	No			
10	The patient is receiving continuous Electronic Fetal Monitoring during this trial of labor	Yes	No			
11	Patient has been type and screened/cross-matched with blood available on site	Yes	No			

Note: If there are any "NO" responses above. DO NOT PROCEED WITH A TRIAL OF LABOR

Patient, Clinicians and Environment is Appropriately Prepared for a Trial of Labor

Yes N/A

OB Provider Signature:

Date:

Time:

Nurse Signature:

Date:

Time: