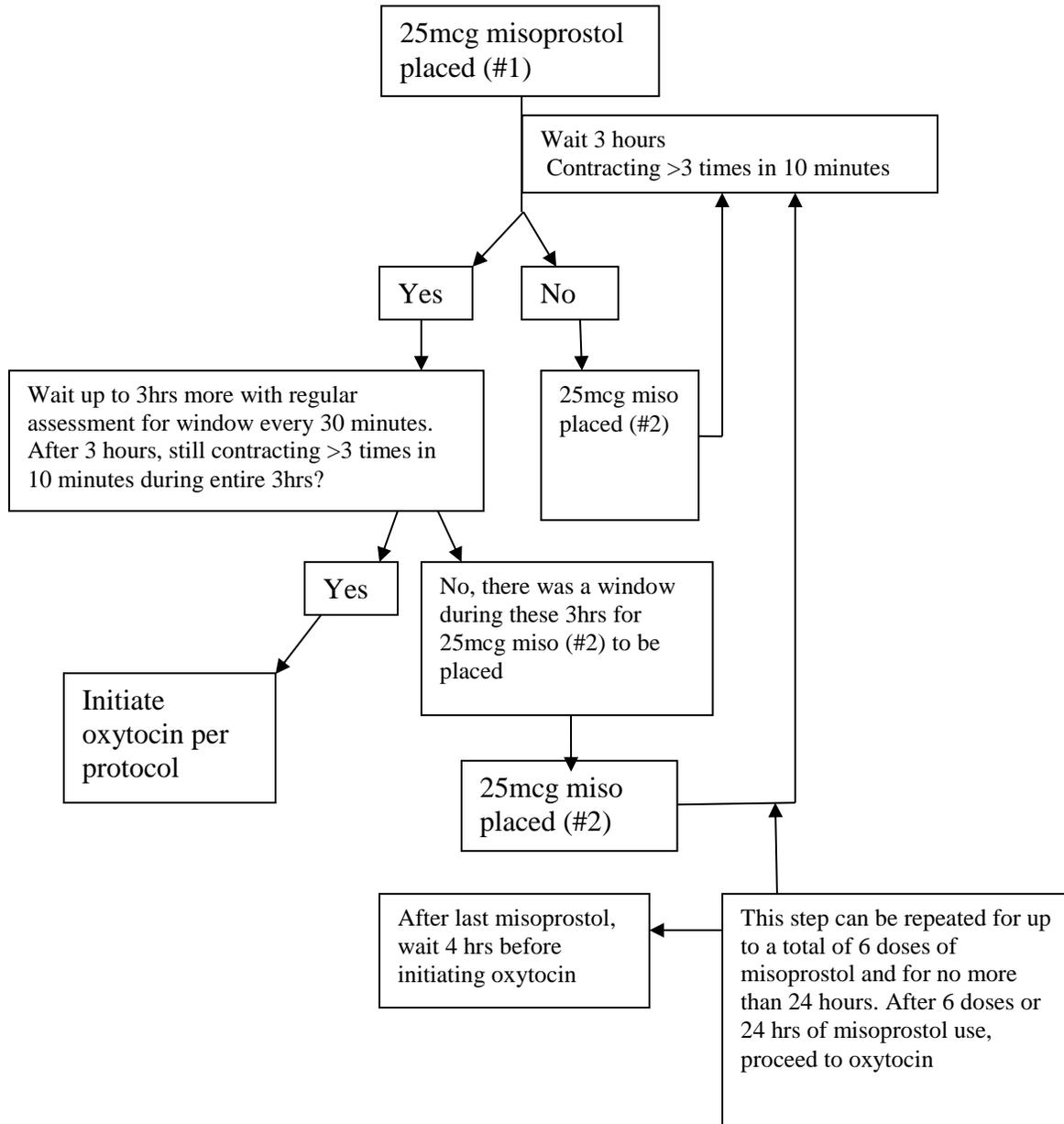


S1 - MISOPROSTOL ONLY PROTOCOL



- Oxytocin can be initiated 4hrs after placement of last misoprostol
- If patient is ≥ 4 cm dilated and has intact membranes, perform amniotomy
- If patient is in active labor (≥ 5 cm dilated), proceed with active labor protocol.
- If patient is not in active labor after 36 hours from the start of the induction, proceed with cesarean delivery.
- Exams should be performed:
 - Every 3hrs in latent labor if misoprostol being used
 - Every 2-4 hrs in latent labor if oxytocin is being used
 - Every 1-2 hours in active labor
- Notes should be written every 2-4hrs

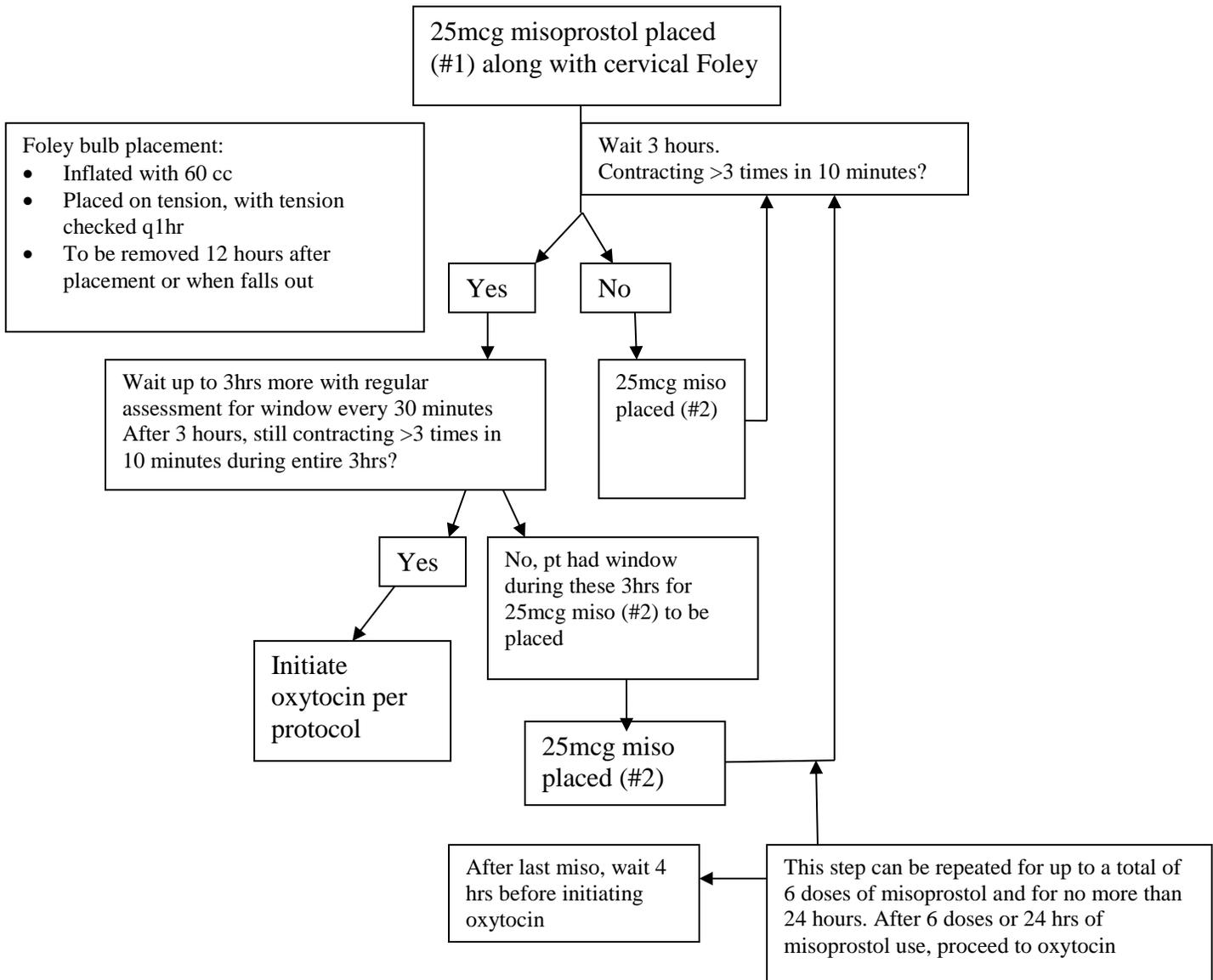
S2 - CERVICAL FOLEY ONLY PROTOCOL

Cervical Foley placement

- Foley bulb placement:
- Inflated with 60 cc
 - Placed on tension, with tension checked q1hr
 - To be removed 12 hours after placement or when falls out

- If cervical Foley cannot be placed at initial exam, a second higher level provider must attempt. If still unable to place, exclude from study.
- In order to call it a failed placement attempt, an attempt must be made with patient placed in stirrups and under direct visualization.
- Oxytocin can be initiated once cervical Foley has fallen out or after 12 hours in place
- If patient is ≥ 4 cm dilated and has intact membranes, perform amniotomy
- If patient is in active labor (≥ 5 cm dilated), proceed with active labor protocol.
- If patient is not in active labor after 36 hours from the start of the induction, proceed with cesarean delivery.
- Exams should be performed:
 - Every 3hrs in latent labor if Foley in place
 - Every 2-4 hrs in latent labor if oxytocin is being used
 - Every 1-2 hours in active labor
- Notes should be written every 2-4hrs

S3 - COMBINED MISOPROSTOL/FOLEY PROTOCOL



- If cervical Foley cannot be placed at initial exam, a second higher level provider must attempt. If still unable to place, repeat exam in 1-2hrs from misoprostol placement to reattempt Foley placement.
- In order to call it a failed placement attempt, an attempt must be made with patient placed in stirrups and under direct visualization.
- Remove Foley if still in place after 12hrs from placement. Can continue with misoprostol use after Foley is removed as long as it meets criteria noted above.
- Oxytocin can be initiated 4hrs after placement of last misoprostol, regardless of whether cervical Foley still in situ
- If patient is ≥ 4 cm dilated and has intact membranes, perform amniotomy
- If patient is in active labor (≥ 5 cm dilated), proceed with active labor protocol.
- If patient is not in active labor after 36 hours from the start of the induction, proceed with cesarean delivery.
- Exams should be performed:
 - Every 3hrs in latent labor if misoprostol/Foley being used
 - Every 2-4 hrs in latent labor if oxytocin is being used
 - Every 1-2 hours in active labor
- Notes should be written every 2-4hrs

S4 - COMBINED FOLEY/OXYTOCIN PROTOCOL

Cervical Foley placement & initiation of oxytocin per protocol

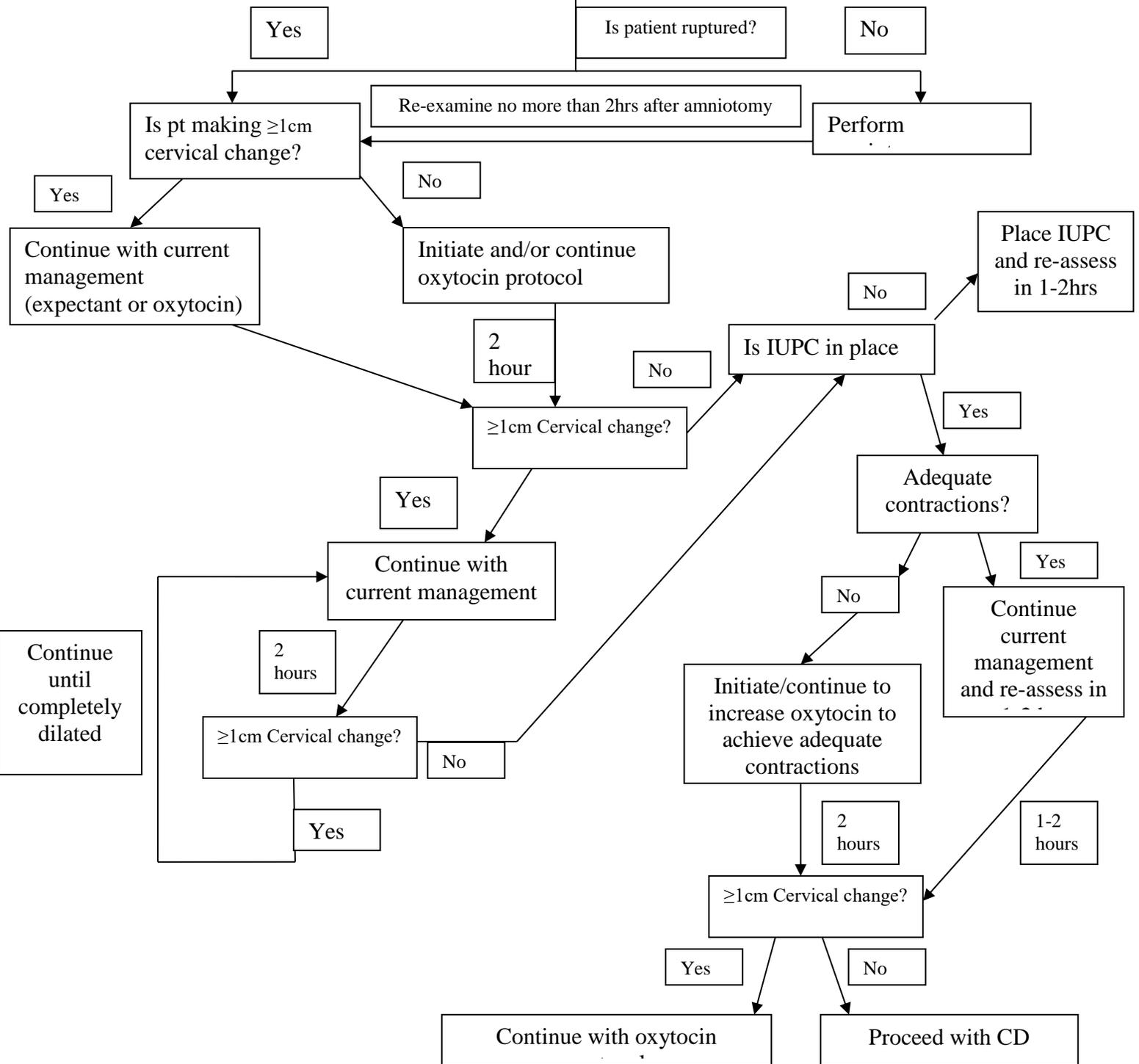
- Foley bulb placement:
- Inflated with 60 cc
 - Placed on tension, with tension checked q1hr
 - To be removed 12 hours after placement or when falls out

- If cervical Foley cannot be placed at initial exam, a second higher level provider must attempt. If still unable to place, begin oxytocin without cervical Foley and repeat placement attempt every 1-2hrs
- In order to call it a failed placement attempt, an attempt must be made with patient placed in stirrups and under direct visualization.
- Remove Foley if still in place 12 hrs after placement. Continue oxytocin at this time.
- If patient is ≥ 4 cm dilated and has intact membranes, perform amniotomy
- If patient is in active labor (≥ 5 cm dilated), proceed with active labor protocol.
- If patient is not in active labor after 36 hours from the start of the induction, proceed with cesarean delivery.
- Exams should be performed:
 - Every 3hrs in latent labor if Foley in place
 - Every 2-4 hrs in latent labor if Oxytocin is being used
 - Every 1-2 hours in active labor
- Notes should be written every 2-4hrs

S5 - ACTIVE LABOR PROTOCOL

Patient is in active labor (≥5cm dilation)

INDUCTION PROTOCOL



- If patient is not delivered in 12 hrs after the start of active labor, proceed with cesarean
- Exams should be performed:
 - every 1-2hrs in active phase
 - every 1hr in 2nd stage
- Notes should be written:
 - every 2hrs in active phase
 - every 1hr in 2nd stage