



Chapter 44

EXTERNAL CEPHALIC VERSION

External cephalic version is encouraged for those breech presentations in which no contraindication exists (classical C/S scar, placenta previa, etc). This should be done at or after 37 weeks, and in the labour/birth suite. Training of obstetric personnel in this procedure should be encouraged.

SOGC Policy Statement No. 31, 1994

Method

1. Ask the woman to empty her bladder.
2. An ultrasound is performed to:
 - determine type of breech
 - localize the placenta
 - identify the attitude of the fetal head (deflexed)
 - look for evidence of the umbilical cord around the neck
3. NST is done prior to initiation of the procedure
4. The woman is placed supine with the abdomen exposed. (Partial flexion of the woman's thighs may be helpful).
5. The clinician's hands should be warmed.
6. The woman is encouraged to use relaxation techniques.
7. Under ultrasound guidance by an assistant (looking at FHR), the operator, with one hand, displaces the breech upward toward the iliac fossa. The other hand grasps the fetal head and the baby is guided gently in a forward somersault ("following the nose") to maintain flexion.
8. Following the procedure:
 - a. an ultrasound is done to check fetal position
 - b. an NST is done to assess fetal wellbeing

9. The woman is instructed to report any:
 - a. vaginal bleeding
 - b. loss of amniotic fluid
 - c. reduction in fetal activity
10. Undue force should not be exerted in performing this procedure
11. If the mother is Rh negative, she needs to receive Rh prophylaxis.

