Maternity information factsheet

Having an emergency caesarean birth under general anaesthetic Information for birth partners

To keep your partner and your baby safe, we have made the decision to take them to an operating theatre to perform an emergency caesarean birth under general anaesthetic.

We understand that this may be a stressful time for you, so we have written this factsheet to give you as much information as possible. It explains what an emergency caesarean birth is, what the operation under general anaesthetic involves and how we will care for your partner and your baby after the operation. We hope it will help to answer some of the questions you may have. If you have any further questions or concerns, please speak to a member of your partner's healthcare team.

What happens next?

Unfortunately, it is not possible for you to accompany your partner to the operating theatre. We will ask you to stay in a birthing room on our labour ward until your baby is born.

While you are waiting, you may wish to call a friend or family member for support. Alternatively, you can contact the free Baby Buddy Support Helpline for anonymous support via text message any time of day or night. To do this, text **BABYBUDDY** to **85258**.

Website: **www.bestbeginnings.org.uk/baby-buddy-support-service** You can also access this support helpline via the Baby Buddy app.

What is an emergency caesarean birth?

A caesarean birth is an operation to deliver your baby through a cut made in your partner's abdomen (tummy) and womb. The cut is usually made across your partner's abdomen, just below their bikini line.

A caesarean birth can be:

- planned in advance (this is called an elective caesarean birth)
- performed as a result of complications that occur during labour (this is called an emergency caesarean birth)

Your partner may need an emergency caesarean birth if:

- there are concerns about the wellbeing of your baby and your baby needs to be born quickly
- there are concerns about your partner's wellbeing
- your partner's labour hasn't progressed as it should

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Most caesarean births are performed under regional anaesthesia (spinal or epidural), even in an emergency. This is given either as an injection or as an infusion via a fine plastic tube called an epidural catheter in the lower back and it numbs the lower part of the body. If your partner has this type of anaesthetic, they will be awake for the operation.

However, some caesarean births need to be performed under general anaesthesia. This may be because general anaesthesia is more appropriate for your partner's health or because your baby needs to be born quickly. If your partner has this type of anaesthetic, they will be asleep during your baby's birth and will not feel any pain.

What will happen to my partner?

We will transfer your partner to our operating theatre, where there will be a team of medical professionals ready to care for your partner and your baby.

Once in our operating theatre, an anaesthetist will give your partner the anaesthetic medication needed to send them to sleep and keep them asleep for the duration of the operation (so they won't move or feel any pain). The anaesthetic will be given to your partner through a cannula (a thin, plastic tube) in the back of their hand.

A caesarean birth usually takes about 40 minutes in total; 10 minutes from the beginning of the operation until your baby is born and a further 30 minutes for us to complete the operation. However, as every caesarean birth is different, these timings may vary, and your baby's birth may take slightly longer. We will inform you of your partner and baby's wellbeing as soon as we are able to do so. Please speak to a member of the labour ward team if you have any questions or concerns.

After the operation, the anaesthetist will stop giving your partner the anaesthetic and they will gradually wake up. We will then transfer them from our operating theatre to our theatre recovery area, as they will feel quite sleepy and may feel nauseous (sick) for a short while after waking up. They may also have a sore throat. We will regularly assess your partner's wellbeing while they recover and offer them pain relief to help ease any discomfort. To respect the privacy of others recovering, you will not be able to stay with your partner while they are in this area.

As soon as they are feeling well enough, we will transfer them to a room on our labour ward to continue their recovery. You will be able to join them in this room with your baby (if they are also well enough).

What will happen to my baby?

After your baby is born, we will wait up to two minutes before cutting their umbilical cord. This will help your baby to adapt to life out of the womb and reduce their risk of having a low blood count (anaemia) in their first few months of life. During this important process, we will lie your baby on your partner's lap, as gravity helps to speed up this process. Our team will hold your baby and keep them warm throughout this process. We will then cut their umbilical cord and a member of the neonatal team will assess your baby's wellbeing.

We will also take some photos of your baby if you and your partner would like us to do so. These photos will be uploaded onto your partner's digital maternity record, where they will be available for you and your partner to view and download should you wish to do so. We will take the photos as soon as we are safely able to do so. This will depend on the wellbeing of your partner and your baby.

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If your baby is well

If your baby is well and we have your partner's previously agreed permission, we will bring your baby to you. You will then have the opportunity to hold and cuddle your baby against your skin, if you wish to do so. This type of skin-to-skin contact has been shown to offer several benefits to both you and your baby, including helping to regulate their body temperature, heart rate and breathing.

We will support both you and your partner with feeding and caring for your baby.

If your baby needs some additional help and support

If your baby needs some extra support with their breathing when they are born, our neonatal team will arrange this.

If your baby is unwell when they are born, we may transfer them to our neonatal unit, where we will place them in an incubator or heated cot. If this is the case, we will try to arrange for you to see your baby before they are transferred to the neonatal unit. However, this may not always be possible.

As soon as your baby is settled on the neonatal unit, you will be able to go and visit them. This 'settling in' period usually takes one to two hours. Your partner will also be able to visit your baby as soon as they are well enough to do so.

The neonatal team will involve you as much as possible in your baby's care and will explain the reason for any treatment they are receiving. They will also be happy to answer any questions you may have.

Contact us

If you have any questions or concerns, please speak to the midwife caring for your partner.

Useful links

www.nhs.uk/conditions/caesarean-section

www.bestbeginnings.org.uk/baby-buddy-support-service

www.tommys.org/pregnancy-information/giving-birth/caesarean-section/c-section-tips-dads-and-partners

For a translation of this document, or a version in another format such as easy read, large print, Braille or audio, please telephone 0800 484 0135 or email patientsupporthub@uhs.nhs.uk

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **www.uhs.nhs.uk/additionalsupport**