

Patient Information Form: OUTPATIENT CERVICAL RIPENING WITH AN INTRAUTERINE BALLOON CATHETER

Cervical ripening is a process meant to help soften and gently open the cervix to make your induction shorter and easier. One method of cervical ripening is placing a balloon catheter (a soft rubbery tube) through the cervical opening during a vaginal exam and filling the catheter's balloon with water. The other end of the catheter may be taped to your inner thigh with gentle tension to aid the ripening process.

Potential side effects of a cervical balloon catheter include starting contractions, a small amount of vaginal bleeding, infection, and discomfort with placement. Although every woman has a different pain threshold, most women feel pain at the time of placement and menstrual-like cramping after placement that is usually tolerable. Many women may contract, and this may or may not lead to spontaneous labor. During this process, there is a small possibility of fever and infection. Your bag of water may break with a rare possibility of the umbilical cord moving in front of the baby's head or movement of the baby out of the birth canal (it is possible that both things can occur even without the balloon catheter and is not thought to be caused by balloon catheter placement).

The process for outpatient cervical ripening includes monitoring of both you and your baby before the balloon catheter is inserted. After placement, you will be monitored again, and if all is well, you will be discharged home with instructions to remove the device after 12 hours. Our hope is that you will have a restful night in the comfort of your home during cervical ripening. Once the device is removed or passes on its own, you should expect a call when Labor and Delivery is able to support your induction of Labor. If you have any concerns before that time, please present for evaluation.

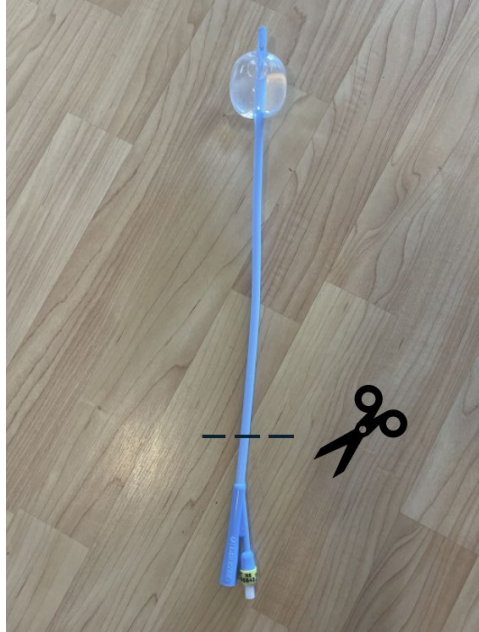
If you have additional concerns, please discuss them with your provider before the catheter is placed. The alternative to outpatient cervical balloon catheter ripening is traditional, in-hospital cervical ripening that may, or may not, include the use of a cervical balloon catheter.

Home Management and Follow-Up Instructions:

1. The catheter may remain in place under gentle tension and be taped to your inner thigh or may be loose and not under tension. Do not pull on the catheter or remove any tape while it is in place. Please use caution when cleansing yourself to avoid dislodging the catheter. Do not have sex.
2. You may see some bloody drainage in the tubing, this is normal and not a cause for concern.
 - a. If the catheter falls out, do not be alarmed, this means it has done its job to soften and open your cervix. You may remove the tape and throw the catheter away.
3. Drink fluids, eat normally, rest and try to get a good night's sleep. You may use Tylenol[®] or Benadryl[®] to assist with sleep.
4. If the catheter has not fallen out after 12 hours, please use scissors to carefully cut the tubing above the port (see photo below), the water will slowly drain from the bulb, then gently remove the tubing. We will make every effort to admit you for induction of labor after device removal, however there is no guaranteed admission, and all admissions are pending the status of Labor and Delivery staff and bed space at time of assessment.
5. Please call (808) 433-9900 and be prepared to come to Labor & Delivery if:
 - a. You have concerns
 - b. You feel you are in labor
 - c. You have severe pain
 - d. You have a fever over 100.4°F or develop shaking chills
 - e. You feel there is too much bleeding
 - f. You notice decreased baby movement.
 - g. You are leaking fluid

How to Remove the Catheter:

There are several brands of catheters that may be used, but they all work the same way. If the catheter has not fallen out after 12 hours, please use scissors to carefully cut the tubing above the port (see photo below), the water will slowly drain from the bulb, then gently remove the tubing.



You may have a sticker attached to your thigh to help create some gentle tension on the balloon, or the catheter may be loose and not under tension. The tape may look like the photo below:

