Most babies are born between 37 and 42 weeks of pregnancy. Very few babies are born on their due dates.

For some women with certain medical issues, having the baby before the due date is safer than continuing the pregnancy. In this instance, your labor may be induced if you have not started labor on your own. When labor is induced, it causes a pregnant woman's cervix to open (dilate) and thin out (efface) to prepare for the vaginal birth of her baby. More than one method of labor induction may be used.

Labor may also be induced for other reasons such as being at risk for rapid delivery or if you live a far distance from the hospital. When labor is induced in these cases, care providers agree that it is safest for your baby to be delivered after 40 weeks of pregnancy. The chances of your baby experiencing significant health issues related to breathing problems decrease the closer the baby delivers to his or her due date. If you and your care provider decide it is best for you to deliver before 39 weeks, your care provider may consider further testing.
How is an induction of labor done?

Your care provider will determine the best induction method for you based on your history and your cervical exam. There are a number of methods for starting labor that are done in the hospital, where labor and delivery services are available and your baby can be monitored. The length of time from the start of an induction to the delivery of your baby varies greatly among women and may take from hours to more than a day.

• **Preparing the Cervix with “Prostaglandins”**
  
  If your cervix is not ready for labor, medications called prostaglandins can be taken to make it soft and able to stretch for labor. The most frequently used prostaglandin at Lutheran is called “Misoprostol.” It is a very small tablet that may be placed near your cervix during a vaginal exam by your healthcare provider or nurse or you may be asked to take it orally. It can be repeated every 4 hours until your cervix softens.

• **Preparing the Cervix with a “Cervical Ripening Balloon”**
  
  If your cervix is not ready for labor, another option which may be available is the placement of a small balloon catheter inside your cervix. The balloon is used to place pressure on your cervix in order to soften and “ripen” your cervix in preparation for labor.

• **Oxytocin (Pitocin)**
  
  Oxytocin is a medication that causes contractions. It is a man-made form of the hormone your body naturally produces during labor. When oxytocin is used to induce labor or make contractions stronger, it flows into your bloodstream through an intravenous (IV) tube in your arm. A pump hooked to the IV tube controls the amount you are given.

• **Rupturing the Amniotic Sac**
  
  If it hasn’t already broken, “breaking your water” can get contractions started. Your care provider may make a small opening in the amniotic sac. This is done during a vaginal exam and you may feel some slight discomfort as this is done during the exam. This method of labor induction may be used in combination with Pitocin.

**Scheduling an Induction at Lutheran**

Your healthcare provider will schedule your induction in the Labor and Delivery department on the 2nd floor; and they will let you know the date and time you should plan to arrive. In order to provide you with a quality and safe experience for you and your baby, your induction may need to be postponed or rescheduled based on labor room and nurse availability. Please let us know a phone number where you may be reached the day of your scheduled induction.

You can call an OB Navigator at 303-425-2515 for more information about pre-registration and a tour of the Mom-Baby unit before your scheduled induction. If you have any further questions, you may contact your healthcare provider or the Labor and Delivery Charge Nurse at 303-425-2140.