

## Your risks in pregnancy: deciding the right place for you to give birth

These categories are taken from our 'Clinical Risk Assessment' guideline.

They will give you guidance as to your risks so that you can decide the best place for you to give birth.

Please look at the relevant pages in your Pregnancy Information Book where relevant and discuss your situation with your midwives and doctors.

LOW RISK – SUITABLE FOR HOME BIRTH OR MLU (MIDWIFE-LED UNIT)
Age 18 up to 40 <sup>th</sup> birthday at time of at time of your booking appointment
BMI 18 up to 34.9 at time of at time of your booking appointment
Your labour starts spontaneously
Single baby, head down at time of birth
You are between 37+0 and 42+0 weeks pregnant
Your haemoglobin (Hb) is 100g/L or more; your Platelet level is 100 or more

MEDIUM RISK – INDIVIDUAL PLAN ACCORDING TO CIRCUMSTANCES	
RISK	PLACE OF BIRTH
Age under 18 years	MLU/Home dependent on multidisciplinary team (MDT) assessment
Age 40 and over	MLU/Home if previous normal births  Consultant Unit if induction of labour (IOL) at 40 weeks
Allergies	MLU/Home
Asthma	MLU/Home if no ongoing medication
Atypical antibodies	MLU/Home dependent on Neonatal Alert Plan
BMI ≥ 30-34.9	MLU/Home
Crohn's Ulcerative Colitis	MLU/Home – dependent on medication and severity of condition
Female Genital Mutilation	Dependent on individual birth plan agreed with Named Consultant Obstetrician for FGM
Hepatitis B/C with <b>normal LFT (liver function tests)</b>	MLU/Home if LFT normal throughout pregnancy and dependent on Neonatal Alert Plan
Hypothyroid on medication	MLU/Home if thyroid function test results within normal range
Group B Strep	Plan for CU birth for antibiotic administration.

<b>MEDIUM RISK – INDIVIDUAL PLAN ACCORDING TO CIRCUMSTANCES</b>	
<b>RISK</b>	<b>PLACE OF BIRTH</b>
Mental Health <ul style="list-style-type: none"> <li>▪ Positive 'yes' to marker questions at booking appointment</li> <li>▪ Current antidepressant medication</li> <li>▪ Known psychiatric disorder</li> </ul>	MLU/Home dependent on individual assessment and Neonatal Alert
Five previous births	MLU/Home up to if no other risk factors for birth.
Social Concerns	MLU/home dependent on MDT assessment with Safeguarding Midwife and Shropshire/Telford & Wrekin Childrens Services
<b>One</b> previous operative vaginal birth (Forceps or Ventouse)	MLU/Home
Birth weight more than 4.5kg (previous pregnancy)	MLU/Home if growth below 90 <sup>th</sup> centile and normal GTTs in this pregnancy
Birth weight under 5 <sup>th</sup> centile on customised growth chart (previous pregnancy)	MLU/Home if growth above 5 <sup>th</sup> centile on ultrasound scan in this pregnancy
3 <sup>rd</sup> /4 <sup>th</sup> Degree Tear	Individual risk assessment for MLU/Home
Pre-eclampsia /hypertension in previous pregnancy	MLU/Home if BP normal in this pregnancy
Preterm, Labour	MLU/Home if ≥37 weeks at onset of labour
Gestational Diabetic	MLU/Home if GTT normal
Gynaecological history	MLU/Home dependent on individual risk assessment
Postpartum haemorrhage (PPH) 500-1000 mls without requirement for blood transfusion	MLU/Home
Retained placenta	Consultant/MLU/Home

<b>HIGH RISK – CONSULTANT UNIT BIRTH</b>
Age over 40 in first pregnancy
Age 14 years or younger
BMI ≥ 35
BMI <18
Five or more previous babies
Asthmatic
Current oral steroid use
Cardiac problems – current

**HIGH RISK – CONSULTANT UNIT BIRTH**

Endocrine disorders, e.g.

- Diabetes
- Hyperthyroidism

Epilepsy

Haematological

- Haemoglobinopathies – sickle cell disease
- beta thalassaemia major
  
- History of thromboembolic disorder
  
- Immune thrombocytopenia purpura/or other platelets disorder/Platelets below 100
  
- Von Willebrands
  
- Atypical antibodies that may carry the risk of haemolytic disease in the newborn

Immune

Systemic Lupus Erythematosus

Infective

- Hepatitis B/C with abnormal liver function
- HIV
- Syphilis
- Active infection of chickenpox
- Active genital herpes
- TB

Mental Health

Psychiatric Disorder requiring inpatient Care

Renal

Abnormal renal function

Current contact with Renal Specialist

Substance Misuse

Anaemia – haemoglobin less than 100g/L at onset of labour

Antepartum haemorrhage (APH) – recurrent in pregnancy with no known cause

Cholestasis

Induction of Labour

Multiple Pregnancy

Placenta Praevia

Pre-eclampsia or Hypertension

Preterm Labour or Preterm PROM

Reduced Fetal Movements – two or more episodes of within 4 weeks

Small for gestational age

Large for gestational age

Rupture of membranes more than 24hrs before labour starts

Refusal of Blood Products

Caesarean Section

Eclampsia

PPH requiring blood transfusion

Previous Shoulder Dystocia

## HIGH RISK – CONSULTANT UNIT BIRTH

Previous Stillbirth/Neonatal Death or previous death related to intrapartum difficulty

Uterine rupture

### Other sources of information

- **NHS Choices**

The UK's biggest health website, certified as a reliable source of health information:  
[www.nhs.uk](http://www.nhs.uk)

- **Patient**

Evidence based information on a wide range of medical and health topics.  
[www.patient.info](http://www.patient.info)

### Patient Advise and Liaison Service (PALS)

PALS will act on your behalf when handling patient and family concerns, they can also help you get support from other local or national agencies. PALS, is a confidential service.

**Princess Royal Hospital**, Tel: 01952 282888

**Royal Shrewsbury Hospital**, Tel: 0800 783 0057 or 01743 261691

**Website:** [www.sath.nhs.uk](http://www.sath.nhs.uk)

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### Your information

Information about you and your healthcare is held by the NHS. You can find out more about how we hold your information and how it is used on our website in your Pregnancy Information Book.

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