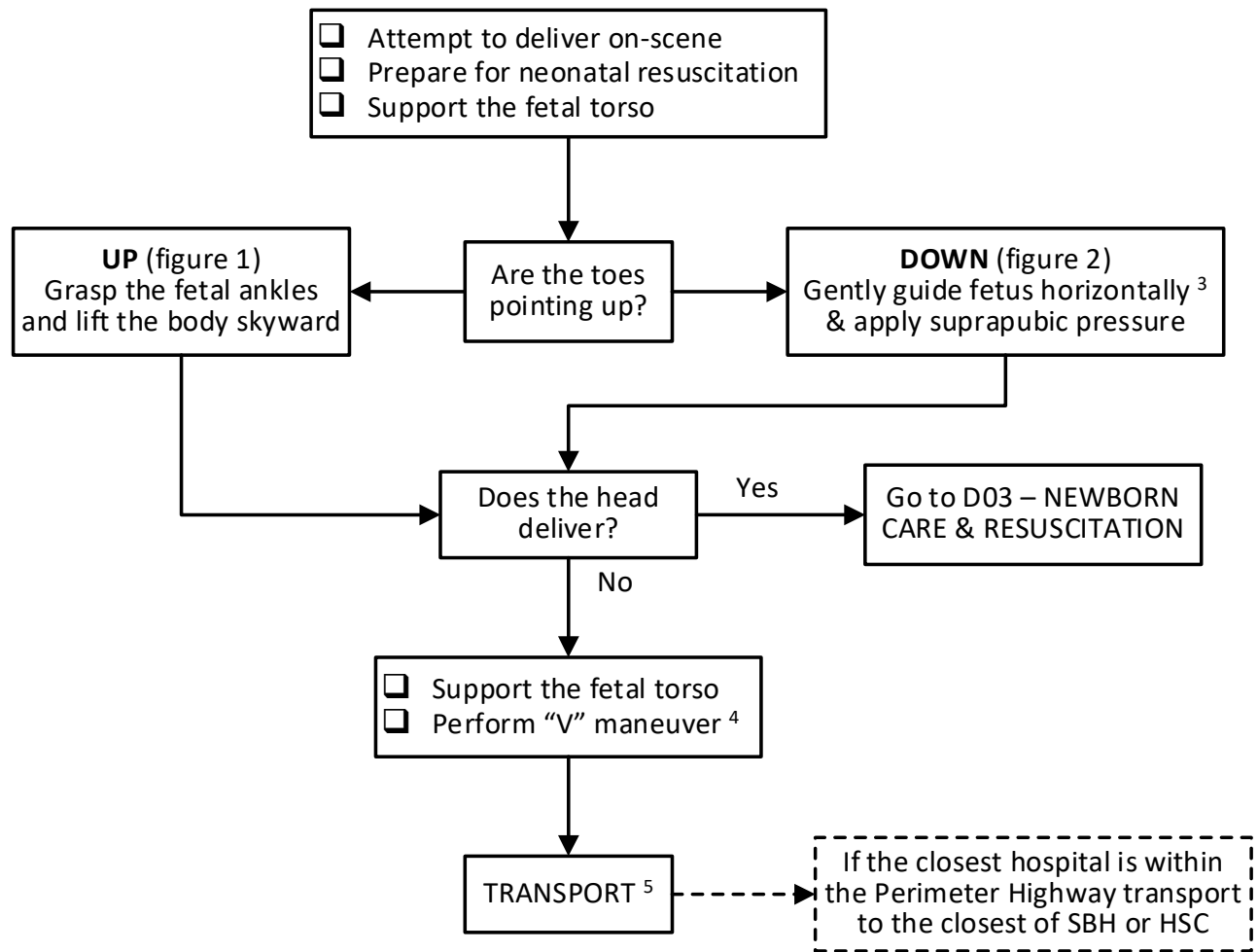
	<b>D07 - FRANK OR COMPLETE BREECH PRESENTATION</b>	
	MATERNAL & NEWBORN CARE	
<b>ALL</b> - Paramedics with all work scopes will follow this protocol.		
Version date: 2022-11-25	Effective date: 2022-11-29 (0700 hrs)	



<b>QRG: OBSTETRICAL FACILITIES</b>	
<i>(*) Paramedics should call ahead to confirm that normal obstetrical services are currently available.</i>	
<ul style="list-style-type: none"> <li>• Bethesda Regional Health Centre (Steinbach)</li> <li>• Boundary Trails Health Centre (Winkler)</li> <li>• Brandon Regional Hospital</li> <li>• Dauphin Regional Health Centre</li> <li>• Health Sciences Centre (Winnipeg)</li> <li>• Lake of the Woods District Hospital (Kenora, ON) *</li> <li>• Neepawa Health Centre</li> </ul>	<ul style="list-style-type: none"> <li>• Portage District General Hospital (Portage La Prairie)</li> <li>• Selkirk Regional Health Centre (Selkirk)</li> <li>• St. Anthony's General Hospital (The Pas)</li> <li>• St. Boniface Hospital (Winnipeg)</li> <li>• Thompson General Hospital</li> <li>• Yorkton Regional Health Centre (Yorkton, SK) *</li> </ul>

### INDICATIONS

- Complete breech presentation during delivery

### CONTRAINDICATIONS

- None

### NOTES

1. Obstetrical emergencies are fortunately rare but can be very stressful. **Be prepared & call early for assistance, intercept, or the on-line medical support (OLMS) physician.**
2. Breech presentation occurs in approximately three percent of all deliveries. About 60 percent are frank breeches where the hips are flexed and the knees extended while ten percent are complete where the hips and knees are both flexed (appendix A). Most can be delivered vaginally.
3. Lifting the body upwards may cause hyperextension of the neck possibly resulting in spinal cord injury.
4. Place your hand into the vagina between the vaginal wall and fetal face, and cup your hand over the nose and mouth to prevent obstruction.
5. If unable to deliver on scene, the preferred destination is an obstetrical facility where staff have expertise and resources to manage breech deliver and experience with neonatal resuscitation (QRG). However, if the transport time is excessive initial care may have to be provided at a non-obstetrical facility. **Ensure pre-arrival notification.**

FIGURE 1: TOES POINTING UP

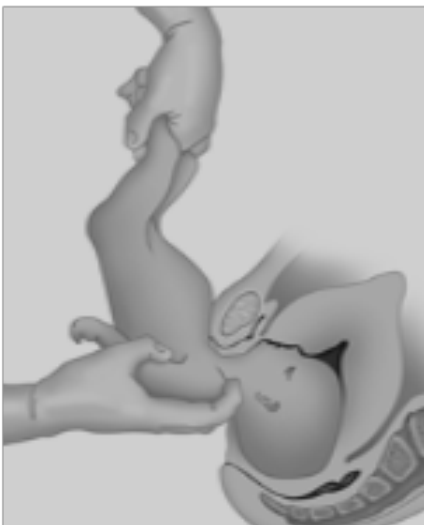
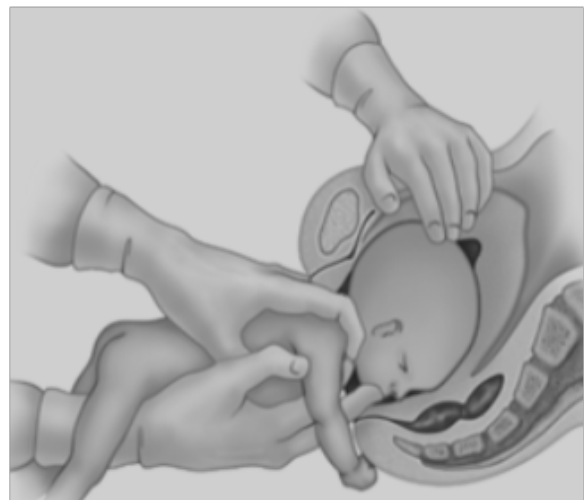


FIGURE 2: TOES POINTING DOWN



<b>LINKS</b>
D03 - NEWBORN CARE & RESUSCITATION

<b>APPROVED BY</b>	
	
Medical Director – Provincial EMS/PT	Associate Medical Director – Provincial EMS/PT

<b>VERSION CHANGES (refer to X04 for change tracking)</b>
<ul style="list-style-type: none"> <li>• Reformatted (works scope indicator moved into header; compliance statement is now policy A03)</li> <li>• Renumbered from D03.2</li> <li>• Separate care maps for incomplete (D06) and frank / complete (D07) breech</li> <li>• Revised flow chart and notes</li> <li>• Support for attempt at on-scene delivery</li> <li>• List of obstetrical facilities</li> </ul>



<b>APPENDIX A:</b>	
<p><b>FRANK BREECH</b></p> 	<p><b>COMPLETE BREECH</b></p> <hr style="width: 20%; margin: 0 auto;"/> 

