

SIGNS AND SYMPTOMS OF LABOR

As your “due” date approaches, you may notice a number of changes. Practice, or Braxton Hicks, contractions may become more frequent and occasionally uncomfortable. The mucous component of your vaginal discharge may increase. Occasionally, this discharge will be tinged with blood. This is the mucous plug that releases as the cervix softens and shortens, or ripens, in preparation for labor. You may also notice a change in the type of fetal movement you experience. This is because, as your baby reaches term size, the amount of room in your uterus decreases which means that your baby cannot flip and turn as he or she used to. Therefore, you will notice a change in the **type** of movement. However, the **frequency** with which you perceive activity should not decrease.

Many women, especially first time mothers, are worried that they may not be able to determine if they are in labor. The following is a guide to help you distinguish between true and what is commonly referred to as “false labor” but which is in fact a period of time when your body begins to prepare for true labor by softening and shortening the cervix.

	“True” Labor	“False” Labor
Contractions		
	Become progressively longer, stronger, and closer together	Do not become longer, stronger, and closer together
	Regular and predictable* (e.g. every 3 – 5 minutes)	Usually irregular
	Felt throughout the abdomen (uterus)	Felt in the top (fundus) of the uterus
	Continue regardless of change in activity	Often decrease with rest and/or hydration
	Generally last 45 – 60 seconds	Irregular in duration (brief to 90 seconds)

Bloody Show

Increase in amount of vaginal mucous (egg white consistency)

Usually no increase in mucous discharge

Blood tinged mucous

Usually no blood tinged mucous

Gastrointestinal

May experience diarrhea, nausea, heartburn

Generally no gastrointestinal symptoms

*** How to time contractions**

- Place your hand on the upper part of your abdomen (uterus).
- Note when the uterus begins to feel hard. The time from the beginning of one contraction to the beginning of the next in minutes is the FREQUENCY of contractions
- Note the LENGTH of time in seconds from the beginning to the end of the contractions.
- Time your contractions for 30 – 60 minutes.

In general, contractions with a FREQUENCY of 3 – 5 minutes and LENGTH of 45 – 60 seconds that continue for an hour indicate the onset of labor.

PLEASE CALL THE OFFICE FOR ANY OF THE FOLLOWING:

- Contractions every 3 – 5 minutes for an hour. (Individuals with a history of fast labor, those who live a great distance from the hospital, or those who are known to have significant cervical dilation may not want to wait a full hour before calling.)
- Ruptured membranes (your bag of water breaks) even if you are not contracting.
- Frank bleeding (You do **NOT** have to call for bloody show, mucous plug, or light bleeding after an office examination.)
- Sudden or marked decrease in fetal activity.
- If you are uncertain or concerned.