

immediately place the baby in skin-to-skin contact with the mother on the mother's chest during the surgery to avoid the contact with a sterilized pad and continue the further care

- Placing the baby in skin-to-skin contact with the mother during the surgery is only possible if the mother is awake and there is no emergency, such as the mother is shaking or her blood pressure is low and is unwell due to the side effects of medicine, etc.
- Inject Oxytocin 5 IU through IV and 20 IU per 1 liter of serum at a speed of 60 drops/minute for two hours
- If the baby does not breathe, check for respiratory obstruction and pumping out phlegm, and immediately press and cut the umbilical cord and hand over the baby to a midwife or pediatrician for a life-saving procedure on the heating bed/device² or a dry place already prepared and located two meters from the surgical bed. If the bed/heating device is no available, cover the baby with a piece of dry cloth, and leave the face and chest open, and pumping air into the baby chest according to the national guideline for immediate newborn care (INC). If the baby normally breathes, stop the pumping of air and make sure that the baby continues to normally breathe. If this situation remains good, remove the gloves and wear new sterilized gloves to trim the umbilical cord, and immediately place the baby in skin-to-skin contact with the mother if the mother does not require any emergency procedure

Place the baby in skin-to-skin contact with the mother for at least 60 minutes by keeping the baby on the mother's chest when the mother is transferred from the surgical table to the post-surgery ward. Under some circumstances in which the staff cannot transfer the mother and the baby at the same time, wrap and hold the baby temporarily until the mother is transferred to the post-surgery ward, then continue to place the baby in skin-to-skin contact with the mother. The implementation of immediate newborn care, including the weighing, measuring the length and circumference, ID tagging, checking the baby, injecting vitamin K1, applying eye drops, and vaccinating must be delayed until after the baby is breastfed for the first time and has been placed in skin-to-skin contact for at least 60 minutes.

Note: Read the detailed instruction in "*Operation Benchmark for Early Essential Newborn Care (EENC) during the cesarean sections*".

- Provide a dose of antibiotic, ampicillin 2g IV, or cefazoline 1g after the umbilical cord is pressed and cut
- Remove the placenta by gently extending the umbilical cord and scrub the uterus (on the stomach)

² The heating bed/device should be operated at a temperature of 36.5C in preparation for saving the babies.

Mebendazole Sulphadoxine-pyrimethamine Water for injection Tetracycline 1% eye ointment Vitamin K1 (vial 1ml = 10mg) Nevirapine (adult, infant) Zidovudine (AZT) (adult, infant) Lamivudine (3TC)
Vaccine
Tetanus toxoid BCG OPV Hepatitis B
Specification of drug preparation
Ampoules, 10 IU Ampoules, 1 mg Ampoules 50%, 10ml=5g MgSO ₄

Provisional translation

3: Emergency obstetric surgery, anesthesia, blood transfusion

Basic Equipment
<p>Sphygmomanometer (aneroid) and stethoscope (binaural) Self-inflating bag and face masks (adult size) Self-inflating bag and face masks (newborn sizes 0 and 1) Adult and infant laryngoscope with spare bulb and batteries Adult and infant laryngoscope tubes Absorbable, nonreactive sutures (i.e., polyglycolic, chromic catgut) and suture needles Urinary catheters and closed bag or container for catheter drainage Tourniquet 16- to 18-gauge IV cannulas Dextrose solution (5%) Ringer's lactate or normal saline IV administration sets Adhesive tape Oxygen tubing, nasal cannula, and face masks Suction tubing and catheters Surgical scrub brushes</p>
Obstetric Laparotomy and/or Caesarean Section
<p>Stainless steel instrument tray with cover Towel clips (5) Sponge forceps, 22.5 cm (6) Straight artery forceps, 16 cm (4) Uterine hemostasis forceps, 20 cm (8) Hysterectomy forceps, straight, 22.5 cm (4) Mosquito forceps, 12.5 (6) Tissue forceps, 19 cm (6) Needle holder, straight, 17.5 cm (1) Surgical knife handle, No. 3 (1), No. 4 (1) Surgical knife blades (4) Triangular point suture needles, 7.3 cm, size 6 (2) Round-bodied needles No. 12, size 6 (2) Abdominal retractors, double-ended (Richardson) (2) Curved operating scissors, blunt pointed (Mayo), 17 cm (1) Straight operating scissors, blunt pointed (Mayo), 17 cm (1)</p>
Anesthesia
Anesthetic face masks
<p>Oropharyngeal airways Endotracheal tubes with cuffs (8 mm and 10 mm)</p>

Intubating forceps (Magill)

Endotracheal tube connectors, 15mm plastic (3 for each tube size)

Spinal needles (range of sizes, 18-gauge to 25-gauge)

Blood Transfusion (cross-matching, collection of donor blood, transfusion)

8.5 g/I sodium chloride solution 20%

Bovine albumin

Centrifuge

37 cc water bath (or incubator)

Pipettes Volumetric (1 ml, 2 ml, 3 ml, 5 ml, 10 ml, 20 ml)

Test tubes (small and medium-size)

Sphygmomanometer cuff

Airway needle for collecting blood

Artery forceps and scissors

Pilot bottles (containing 1 ml ACD solution)

Compound microscope and slides

Microscope illuminator

Blood giving sets

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- WHO Recommendations on interventions to improve preterm birth outcomes (2015)
- WHO recommendation on Calcium supplementation before pregnancy for the prevention of pre- eclampsia and its complications (2020)
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