

HACKETTSTOWN REGIONAL MEDICAL CENTER

Originator: R. Galdi, RNC
 Reviewed by: Catherine Burns BSN,RNC

Maternal Services
 (Scope)

TITLE: ASSISTING WITH INSERTION OF INTRAUTERINE PRESSURE (IUPC) CATHETER WITH OR WITHOUT AMNIOINFUSION

PURPOSE: To outline procedure to set up equipment and to assist the Healthcare provider with the insertion of a pressure measuring catheter into the uterus of a laboring woman and to assist with amnioinfusion.

SUPPORTIVE DATA: An intrauterine catheter will register the strength of the contractions of the laboring uterus. This information is useful for the management of labor. An amnioinfusion of fluid into the uterine cavity can be an aid in the treatment of fetal decelerations and/or fetal bradycardia in association with cord compression.

- EQUIPMENT:**
1. EFM
 2. Intrauterine pressure catheter (with ability for amnioinfusion if necessary)
 3. Connecting cable
 4. IV fluid, cassette tubing, and infusion pump as ordered (if doing amnioinfusion)
 5. Sterile gloves for provider
 6. Chux

CONTENT:	PROCEDURE STEPS	KEY POINTS
	1. Assemble equipment.	
	2. Explain procedure to patient and position her for ease of insertion.	The provider will have determined if there is ruptured membranes and sufficient dilation to insert catheter.
	3. Attach connecting cable to functioning monitor (white UA port).	
	4. Using sterile technique, open catheter package and attach catheter end to cable. Do not touch rest of catheter.	Prior to insertion, provider will verify that catheter tip does not extend beyond tip of guide.
	5. After insertion, verify that the provider has peeled away the Protect-a-guide.	
	6. To zero the catheter, provider should slide valve to the forward position. Check EFM for -0- pressure reading. Then slide valve to the closed position.	<ol style="list-style-type: none"> a. The Intran II is not a fluid-filled system; therefore, it is not necessary to level to patient in relation to the system. b. Zeroing the catheter should be tested by having the patient cough after the zero valve is closed. A rise in pressure should be noted on the monitor strip.

7. Secure the catheter to the patient with device supplied.
8. If amnioinfusion is to be done, be sure the patient understands the procedure and the possible feeling of a change of internal uterine temperature.
9. Prime cassette tubing with fluid and attach to catheter port. Infuse bolus amount via infusion device as ordered.
10. Monitor type and amount of fluid discharged during the infusion. Change Chux for comfort.
11. Patient may be OOB with assistance as ordered by provider.

DOCUMENTATION:

1. Chart the assessment of the patient prior to insertion.
2. Chart insertion of the catheter and amnioinfusion if done.
 - a. Amnioinfusion fluid
 - b. Amount given
 - c. Rate of infusion
 - d. Effect on fetal heart rate

REFERENCE:

1. Package insert for "Intran Plus 1UP-400," Utah Medical Products, Inc., Midvale, Utah; copyright, 1990; rev. Sept. 1992.
2. Simpson, Kathleen R., Creehan, Patricia A., AWHONN Perinatal Nursing, Lippincott, New York, 2008.