

## 5 INTRAPARTUM CARE

### CLINICAL GUIDELINES SECTION B : GUIDELINES RELEVANT TO OBSTETRICS & MIDWIFERY

#### 5.21 PROTOCOLS FOR MEDICATION ADMINISTRATION FOR LABOUR AND BIRTH BY MIDWIVES WORKING IN THE FAMILY BIRTH CENTRE

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5.21.6 Lignocaine 0.5% and 1% administration prior to suturing an episiotomy / genital laceration  
Section B  
Clinical Guidelines  
King Edward Memorial Hospital  
Perth Western Australia

#### 5.21.6 LIGNOCAINE 0.5% AND 1% ADMINISTRATION PRIOR TO SUTURING AN EPISIOTOMY / GENITAL LACERATION

INSTRUCTION	CRITERIA	ROLE OF THE MIDWIFE
<p>Midwives working in the Family Birth Centre (FBC) who have demonstrated clinical competence in the suturing of an episiotomy / genital laceration may administer Lignocaine 0.5% or 1% for perineal infiltration prior to suturing an episiotomy or genital laceration.</p>	<p>Women who following birth have an</p> <ul style="list-style-type: none"> <li>• An episiotomy.</li> <li>• A first degree genital laceration i.e. perineal lacerations, rupture or tear involving the fourchette, labia, skin or vulva</li> <li>• A second degree genital laceration i.e. injury to the perineum involving the perineal muscles, but not involving the anal sphincter.</li> </ul>	<ol style="list-style-type: none"> <li>1. Ensure the womans past medical and obstetric history is available to enable the decision regarding the use of Lignocaine</li> <li>2. Ensure the woman is informed and counselled appropriately as to the reason for the administration and the possible consequences of not receiving the Lignocaine</li> <li>3. Verbal consent shall be obtained from the woman prior to administering the Lignocaine</li> <li>4. Follow the Clinical Guideline B 5.9.3.1 Infiltration and the cutting of an episiotomy <a href="http://kemh.health.wa.gov.au/development/manuals/sectionb/5/5430.pdf">http://kemh.health.wa.gov.au/development/manuals/sectionb/5/5430.pdf</a></li> <li>5. Document the administration of the Lignocaine on the MR810.</li> </ol>