



Labor and Delivery Checklist

Name: _____ Date: _____

Email Address: _____ Phone: _____

Level of Efficiency

1=No Experience

2=Moderate Experience

3= Experienced

4=Proficient

5= Ability to Supervise and Teach

Medication Administration	1	2	3	4	5
Use a Unit Dose System					
Administer IM, SC Medications (i.e., Narcotics)					
Use of Patient Controlled Analgesic Pump					
Monitor IV Drips					
Oxytocin Induction					
Augmentation					
Prostaglandin Induction					
Cervical Ripening Agents					
Prostaglandin					
Cervidil					
Cytotec					
MgSo4					
Terbutaline					
Ritodrine					
Insulin					

Aseptic Technique Relative To Labor And Deliver	1	2	3	4	5
Set-Up a Delivery Table					
Set-Up a Caesarean Table					
Circulate for Caesarean Section					
Scrub for a Caesarean Section					
Circulate Scrub for a Postpartum Tubal Ligation					
Assist with an AROM (Artificial Rupture of Membranes) Procedure					
Assist with Placement of Fetal Scalp Electrodes for Internal Monitoring					
Assist with the Fetal Scalp Blood Sampling Procedure					
Insert a Straight or Foley Catheter					

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Phlebotomy/IV Therapy	1	2	3	4	5
Draw Blood:					
a) Arterial Stick					
b) Venous Stick					
c) Central Line					
Start IV Lines					
Regulate IV's					
Mix IV Infusion Using Additives					
Discontinue Peripheral IV's					
Use IV Infusion Pumps					
Use Heparin Locks					
Institute and Monitor Blood/Blood Products					
Measure CVP Readings					
Patient Controlled Analgesia					

Obstetric Techniques and Procedures	1	2	3	4	5
Conduct a Stress Test (Oxytocin Challenge Test)					
Conduct a Non-Stress Test (NST)					
Perform Cardiopulmonary Resuscitation:					
a) Adult					
b) Infant					
Ultrasound for Fetal Position					
Triage of OB Patients					
Leopold Maneuvers					
Perform Exam and Assess Effacement, Dilation, Station, Presentation					
Amnio infusion					
Ante-Partum Care of Women With:					
a) Pre-Term Labor					
b) Premature Rupture of Membranes					
c) Pyleonephritis					
d) Hyperemesis Gravidorum					
Intrapartum Care of Women With:					
a) Pregnancy Induced Hypertension					
b) Pre-Eclampsia					
c) Eclampsia (Seizures)					
d) Placenta Previa					
e) Abruptio Placenta					
f) Multiple Gestation					
g) Malpresentations					
h) Premature Labor					
i) Diabetes Mellitus					
j) Cardiac Disease					
k) Asthma					
Infectious Disease:					
a) Group Beta Strep					
b) HIV					
c) Hepatitis B					

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Obstetric Techniques and Procedures (Cont'd)	1	2	3	4	5
d) Hepatitis C					
e) Herpes					
Patient with History of Substance Abuse					
Sickle Cell Crisis					
Trauma (MVA)					

Interventions During Labor	1	2	3	4	5
Provide Physical Comfort Measures					
Provide Emotional Support					
Coach in Psycho-Prophylactic Breathing and Relaxation Techniques					
Support, Guide Labor Coach, RN					
Administer Analgesics					
Change Woman's Position, PRN					
Do a Perineal Prep					
Provide Care and Monitor After Rupture of Membranes					
Monitor Fluid Status					

Immediate Care of Infant Post-Birth	1	2	3	4	5
Assess Infant and Assign Apgar					
Suction Infant					
Weigh Infant					
Identify Infant Using Bracelet, Footprints and Mother's Bands					
Administer Vitamin K, IM and Eye Prophylaxis					
Collect Cord Blood Samples					
Perform Emergency Baptism					
Transfer to Newborn Nursery					
Care of Infant with Maternal History Substance Abuse					

Postpartum Intervention	1	2	3	4	5
Fundal Massage					
Assist with Initial Attempts with Breastfeeding at/after Delivery					
Provide Perineal Care					
Assess/Foster Parent-Infant Bonding					
Post Anesthesia Recover Care:					
a) Spinal					
b) Epidural					
c) General					
Implement Measure to Initiate Voiding if Distention Occurs					
Interventions for Post-C Sections					

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Assessment During Labor	1	2	3	4	5
Assess and Document Progression of Labor					
a) Contraction Characteristics					
b) Changes in the Woman's Behavior Appearance					
c) Status of Membranes					
Assess and Document Fetal Status					
a) Determine Fetal Position					
b) Auscultate FHR (Fetal Heart Rate) Using:					
1) Fetoscope					
2) Doptone (Doppler Ultrasound)					
Use of Fetal Monitor:					
a) External Monitor:					
1) Tocotransducer, Ultrasound					
2) Phono or Abdominal, ECG Transducer					
b) Internal Monitor (including connecting the leads & calibrating machine)					
c) Pattern Recognition/Interventions					
1) Basic FHR					
2) Bradycardia					
3) Tachycardia					
4) Sinusoidal (true/false)					
d) Periodic Changes:					
1) Accelerations					
2) Decelerations					
e) Dysrhythmias					
Assess and Document Maternal Status:					
a) Vital Signs					
b) Deviations from the Norm (Edema, Deep Tendon Reflexes, Clonus)					
c) Intake and Output Including Testing Urine					
d) Assess for Bladder Retention					
Assist with Ultrasound Scan					

Assist with Interventions During Delivery	1	2	3	4	5
Spontaneous Vaginal Delivery					
Forceps Vaginal Delivery/Vacuum Extraction Delivery					
Caesarean Section					
Delivery in a Birthing Room Setting					
Labor Room Delivery					
Assist/Monitor Those Requiring Special Surveillance					
a) General Anesthesia					
b) Regional Anesthesia					
1) Epidural					
2) Spinal					
3) Local Infiltration					

Postpartum Assessment	1	2	3	4	5
Fundus Consistency					
Lochia					
Bladder Distention					
Episiotomy					
Incision (For Caesarean Delivery)					
Physical Assessment					

Age Range of Patients Care For	1	2	3	4	5
Infants and Toddlers (ages 0-3 years)					
Young Children (ages 4-6 years)					
Older Children (ages 7-12 years)					
Adolescents (ages 13-20 years)					
Young Adults (ages 21-39 years)					
Middle Adults (ages 40-64 years)					
Older Adults (ages 65-79 years)					
Adults (80+ years)					

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