COMMON TESTS AND PROCEDURES

Common tests and procedures to diagnose preterm labor:

Pelvic exam
Your health care provider might evaluate the firmness and tenderness of your uterus and the baby’s size and position. If your water hasn’t broken and there’s no concern that the placenta is covering the cervix (placenta previa), he or she might also do a pelvic exam to determine whether your cervix has begun to open. Your health care provider might also check for uterine bleeding.

Ultrasound
A transvaginal ultrasound might be used to measure the length of your cervix. An ultrasound might also be done to check for problems with the baby or placenta, confirm the baby’s position, assess the volume of amniotic fluid, and estimate the baby’s weight.

Uterine monitoring
Your health care provider might use a uterine monitor to measure the duration and spacing of your contractions.

Lab tests
Your health care provider might take a swab of your vaginal secretions to check for the presence of certain infections and fetal fibronectin — a substance that acts like a glue between the fetal sac and the lining of the uterus and is discharged during labor. These results will be reviewed in combination with other risk factors. You’ll also provide a urine sample, which will be tested for the presence of certain bacteria.

Source:
Preterm Labor Diagnosis by Mayo Clinic Staff: https://www.mayoclinic.org/diseases-conditions/preterm-labor/diagnosis-treatment/drc-20376848

PREVENTION

You might not be able to prevent preterm labor — but there’s much you can do to promote a healthy, full-term pregnancy. For example:

❤ Seek regular prenatal care
Mention any signs or symptoms that concern you

❤ Eat a healthy diet

❤ Avoid risky substances
like cigarettes and illicit drugs

❤ Consider pregnancy spacing
Some research suggests a link between pregnancies that are spaced closer than 6 months
**PRETERM LABOR**

Preterm labor is labor that occurs before 37 completed weeks of pregnancy, when regular contractions cause the opening of the uterus (cervix) to change. The specific cause isn’t always clear, but we do know that there are some things that increase a woman’s risk of experiencing preterm labor. Understanding the risks and signs and symptoms can help. If preterm labor is caught early, it can be stopped most of the time. The earlier premature births happen, the greater the health risks to your baby. Preventing preterm birth is the best way to promote good health for babies.

**Signs and Symptoms:**

- **Menstrual-like Cramps**
  Constant or come and go, located just above the pubic bone

- **Low, Dull Backache**
  Constant or comes and goes

- **Pressure**
  Feels like the baby is pushing down; feels heavy

- **Abdominal Cramping**
  May or may not have diarrhea, located around the belly-button area

- **Increase or Change in Vaginal Discharge**
  Mucousy, watery, light-colored, or bloody

- **Fluid Leaking from Vagina**
  May be a slow trickle or sudden gush

- **A General Feeling that Something Isn’t Right**
  Go with your gut instinct if you think something may be wrong

- **Uterine Contractions 10 Minutes Apart or Closer (or as directed by your doctor)**
  Sometimes described as feeling like “baby is balling up” – may be painless

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**If You Are Having 5 Contractions or More an Hour and/or Any Warning Signs**

- Empty your bladder
- Lie on your left side (Do not lie flat on your back, even in a recliner)
- Drink 2-3 glasses of water
- Time your contractions from the beginning of one to the beginning of the next

**REMEMBER**

- More than 5 uterine contractions per hour can cause the cervix to open
- Do not wait longer than 30 minutes for any of the warning signs to go away. **Call your health care provider.**
- There is medication available to stop preterm contractions if you **call early.**
- Don’t worry about mistaking “false labor” for the real thing. Everyone will be pleased it’s a false alarm.

**If preterm labor is diagnosed treatment may include:**

- IV fluids
- Medication to relax the uterus
- Medication to speed up development of baby’s lungs
- Antibiotics
- Being admitted to the hospital

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**FEELING FOR CONTRACTIONS**

The best way to feel for contractions is to lie on your left side. Lying on your left side improves the blood flow to the baby and helps relax your uterus. Place your hands on each side of your lower abdomen below the belly button. Your uterus should be firm, but you should be able to indent with your fingers (like pushing on your nose). If it is very firm, (like pushing on your forehead) you may be having a contraction. The way that you time a contraction is from the beginning of one contraction to the beginning of the next one.

**DURATION:** beginning to end of one contraction

**FREQUENCY:** beginning of one contraction to the beginning of the next contraction

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These contractions are coming every 5 minutes and lasting for 60 seconds.