Family-Centered Cesarean Delivery

Sarah B. Francis, MD^a, Shelley L. Galvin, MA^b, Kacey R. Scott, MLIS^c, Kiran Sigmon, MD^a Mountain Area Health Education Center, Asheville, North Carolina ^aDepartment of Obstetrics and Gynecology; ^bCenter for Research; ^cLibrary and Knowledge Services

Study Objective: We implemented a pilot of family-centered cesarean delivery (FCCD) for healthy, term pregnancies (October-December, 2012). This project describes patients' and operative teams' experiences, and compares outcomes between FCCD patients versus patients who underwent routine cesarean delivery (October-December 2011).

Methods: Pilot patients were surveyed via telephone post-discharge on satisfaction with the delivery. FCCD operative teams were surveyed individually immediately post-FCCD on job performance concerns. A retrospective, cohort study, pilot versus historical cohort, matched 2:1, compared intra-operative parameters. We conducted Chi square or Mann-Whitney analysis (p < 0.05).

Results: Eighteen patients underwent FCCD; all reported complete satisfaction, and 12 described their experience: "Like night and day from last c-sec. This was a wonderful experience!"

Two (12.5%) of the infant care team and 1 (6.7%) circulating nurse expressed discomfort due to a lack of experience with FCCD. No negative impact on job performance was reported.

Length of FCCD was not significantly longer [median = 79 (47-126) vs. 67 (42-107) minutes]. No FCCD babies (n = 36) had temperatures requiring intervention (cooling or warming) as compared to 6 (16.7%) comparison babies (p = 0.066). One (2.8%) comparison baby was admitted to the NICU (respiratory distress).

Conclusions: Due to this success, we have instituted mandatory training and routinely offer FCCD.

Key Words: Family-centered cesarean delivery