

A decision aid for pregnant women making choices about having Induction of Labour.

What is informed decision making?

You are the decision maker about your body, your baby, and your birth. When you are making decisions about your pregnancy, labour, and birth, it's important to understand the risks and benefits of all the choices you will need to make. This is called informed decision-making.

Informed decision-making means:

- You have the right to accept or refuse any care or change your mind at any time.
- You have the responsibility to make sure that you fully understand the choices that you are making – ask lots of questions and look at more information to help with this.

Your care team will discuss care recommendations with you as you move through your pregnancy so that you can ask all your questions – and there is no such thing as a silly question! You shouldn't feel rushed to decide on anything unless there's an emergency.

What is this decision aid for?

This guide is here to help you talk about induction of labour (IOL) with your doctor, midwife, obstetrician, and support people. It's been made to help you make informed choices, feel more satisfied with your birth experience, and improve maternity care for everyone. The guide gives clear information about the risks, benefits, and other options for IOL, so you can make decisions that match with what is important to you.

Using this decision guide:

1.

Read through this guide and click on the QR codes or links to the video and more information. This will help you learn more about what you need to know and what IOL might be like for you.

Print out or open the **Induction of Labour Decision Aid Tool** – Link below in Step 3.

2.

Watch the **Induction of Labour Video**. Write down any questions you are thinking about while watching the video.



Use this QR Code or follow the link to view the Induction of Labour Decision Aid Video

<https://www.sunshinecoast.health.qld.gov.au/about-us/news/induction-of-labour>

3.

Next, read each part of the guide and write down any questions on the **Induction of Labour Decision Aid Tool**. Think about what is important to you, your situation, preferences, and plan.



Use this QR Code or follow the link to view the IOL Decision Aid Tool

<https://www.sunshinecoast.health.qld.gov.au/about-us/news/induction-of-labour>

4.

Take your completed **Induction of Labour Decision Aid Tool** to your next appointment so that your doctor, midwife, or obstetrician can go through your questions with you to make sure you are clear.

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What is IOL? Induction of labour is a planned process where labour is started by your healthcare team instead of waiting for it to happen on its own. In Australia, about 1 in 3 women (33%) choose to start their labour this way. The timing and method used for induction depend on your own situation and may be different from one pregnancy to another.

Use this QR Code or follow the link to view the **Qld Clinical Guidelines: IOL Parent Information** – https://www.health.qld.gov.au/data/assets/pdf_file/0018/641430/c-iol.pdf

POST DATES

When your pregnancy has gone beyond your 40-week estimated due date (EDD) by 10 days, this is called “post-dates”. You may see or hear this referred to as 40+10 (40 weeks and 10 days) or 41+3 (41 weeks and 3 days) **The National Safer Baby Bundle (SBB) – Timing of Birth (TOB) initiative** notes that a prolonged pregnancy increases the risk of stillbirth.



Use this QR or follow this link to view - **Timing of Birth: Let’s talk timing of birth.**

<https://saferbaby.org.au/preventative-steps/lets-talk-timing-of-birth/>

Other reasons to discuss IOL with your care team may include:

- Health issues for you, such as unstable diabetes or high blood pressures that are getting worse over time and not responding to medication.
- Health issues for your baby, or repeated periods of reduced fetal movement.
- Your waters breaking but contractions not starting, which increases your chance of infection the longer this happens for.
- Having twins, being an older mother, your ethnicity.
- If you request it for non-medical reasons.



Queensland Government have released the Induction of Labour – Patient Information as a part of their IOL Informed Consent.

Use this QR Code or follow the link to view the [Induction of labour \(IOL\) Queensland Health - Informed Consent: patient information.](#)

The IOL Patient Information provides details on,

- Preparing for an induction
 - Making an informed decision
 - What to know if you decide to have an IOL
 - Vaginal examination and membrane sweep
 - Your IOL booking
- During the IOL
 - **Part 1: Softening, shortening, and opening your cervix**
 - Balloon catheter
 - Prostaglandin
 - Adverse experiences
 - How long will Part 1 take?
 - **Part 2: Breaking your waters and/or oxytocin**
 - Artificial rupture of membranes (ARM)
 - Oxytocin
 - How long will Part 2 take
- What are the risks?
- What are the benefits of IOL and risks of not having one?
- Are there other ways to start labour?
- What should I expect after the induction?
- Who will be performing my induction?
- Where can I find support and more information?



It is also important to understand that if IOL is not recommended for medical reasons, it can affect the development of your baby. Please see the following resources from Safer Baby Bundle (links provided for multiple languages):

Use this QR Code or follow the link to view the [Safer Baby Bundle - Every week counts](#)

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STEPS FOR DECIDING:

When deciding which option is best for you, it can be helpful to consider the reasons for choosing each option. You have your own thoughts or have gathered information from elsewhere. Your past pregnancy experiences may also influence your decision making. This is important take into consideration and discuss with your midwife and wider care team, remembering that you are the ultimate decision maker. Complete the following worksheet to assist with your decision-making process.

WHY IOL MAY BE RIGHT FOR ME & MY BABY

STAR RATING

☆	☆	☆	☆	☆
☆	☆	☆	☆	☆
☆	☆	☆	☆	☆
☆	☆	☆	☆	☆
☆	☆	☆	☆	☆

WHY IOL MAY NOT BE RIGHT FOR ME & MY BABY

STAR RATING

☆	☆	☆	☆	☆
☆	☆	☆	☆	☆
☆	☆	☆	☆	☆
☆	☆	☆	☆	☆
☆	☆	☆	☆	☆

Think about which reasons matter to you the most and why

Some reasons might matter more to you than others and you might want to give this extra thought when making decision. For each reason that you have identified above, mark how much they matter to you on the star scale. This will help you outline areas that need further information.

Consider whether you are favouring one option over the other. After you've carefully considered the reasons for choosing each option and how important each reason is to you, you might find that one option is more suitable for you. Alternatively, you may still be undecided and wish to think about the matter further or ask more questions. It can be helpful to note down your feelings about your options.

STAR RATING KEY

- ☆ It matters a little bit to me
- ☆☆ It matters somewhat to me
- ☆☆☆ It matters a fair bit to me
- ☆☆☆☆ It matters quite a lot to me
- ☆☆☆☆☆ It is non-negotiable

At the moment I am leaning towards....

Having an IOL

Still unsure

Declining IOL

How do you make the decision that is best for you?

The right decision for you may not be the right decision for others. No-one else can make a decision for you while you are able to give informed consent. This decision is about your body, your baby, and your birth. It is yours to make, and it is important that you fully understand the risks and benefits of anything that you are deciding on. Before, during and after your birth you have the right to know what your options are and the responsibility to fully understand the benefits and risks of what you feel is best for you and your baby.

What are the alternatives if you decline IOL?

There are risks and benefits for both induction and not inducing labour. A “conservative management” approach, sometimes called “watch and wait”, is where no medical or physical treatment is given but increased monitoring and checks are carried out to make sure you and your baby are as healthy as possible. This gives an extra chance for labour to begin naturally.

Your midwife is there to support you during labour. A senior midwife or doctor will check your care is still right for you, as needed. You will be a key part of all care team discussions, and you should ask questions to understand the risks and benefits of any plans. You have the right to say no to care, just like you did during pregnancy. Your healthcare providers need to make sure you fully understand the risks and benefits of both accepting and declining care. They might ask you some questions and have you sign a form to confirm this.


Partnering with women who decline recommended maternity care



Queensland Health has developed resources to support women and their healthcare providers to discuss maternity care when women are, or are thinking about, declining recommended maternity care. For further information read: [Recommended maternity care Its your decision.](#)


This will support your decision making by making sure you understand the risks, benefits, and potential consequences of declining recommended maternity care and how this might limit any other options available to you.

Use this QR code or go to: [Partnering with the woman declining recommended maternity care guidelines and video](#) Click on the video link on the right hand side of the page



If declining recommended maternity care, you will be asked to fill out a form with your healthcare provider present.

[Discussion and Partnership Care Plan: Declining Recommended Maternity Care.](#)



Other information about declining recommended maternity care can be found by using the below link or QR code and choosing information from the list.

[Partnering with the woman who declines recommended maternity care](#)

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Note:
In this decision aid guide the words “I/you/your/me/my” mean the woman or another person who is providing consent on behalf of the woman. This decision aid guide uses the terms ‘woman’ and ‘women’ and aligns to the Queensland Clinical Guidelines. It is recognised that individuals have diverse gender identities, and this document includes people who are pregnant or give birth and who do not identify as female.