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# The Fourth Stage Of Labour

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## Abstract

Dear Editor

The Fourth Stage of Labour

Having just returned from an extended period of time training in Tanzania we'd like to bring something to your readers' attention.

We were heavily involved in providing surgical obstetric cover to a small hospital in Tanzania with a draining region of approximately 8000. Whilst here we met a number of very committed midwives and nurses running the labour suite.

We were shocked and appalled to find that we had been able to come this far in our training without realising there were four stages to labour! This is something routinely taught to African midwives and nurses, yet we do not recall seeing it in undergraduate or postgraduate texts in the UK. We were noted on our return that this was also an alien concept to our colleagues.

Why is it that in the West we choose to neglect this important part of labour? It is fairly straightforward and something which is of course undertaken by our midwifery staff, however not formally taught.

The fourth stage of labour is defined as the hour or two after delivery when the tone of the uterus is established and the uterus contracts down again expelling any remaining contents. Nursing and midwifery care during this period of

time includes:

- Transferring the patient from the delivery table
- Providing care of the perineum
- Ensuring the availability of resuscitation equipment
- Checking the fundus
- Monitoring lochia flow
- Monitoring of vital signs
- Evaluating the bladder for evidence of distension
- Checking the placenta
- Checking the neonate
- Providing the mother with a drink and something to eat if required
- Encouraging bonding between mother and baby

Obviously these factors are dealt with in the immediate puerperium, our question is why in a part of the world where maternal mortality is so low, are we not teaching the basics of patient care. It seems clear that we still have a lot to learn from our 'lesser developed' colleagues.

## References

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