
Definition:
Labor Induction without clear medical benefits to mother or fetus at that point in time compared with continuation of pregnancy.

Guide for indications that make the induction non-medically indicated:
- History of fast labor
- Distance from hospital
- Suspected macrosomia (without history of shoulder dystocia)
- Psychosocial (e.g. partner’s deployment date, family or significant relation availability, adoption, etc…)
- Maternal discomfort (e.g. hemorrhoids, reflux, sciatic nerve pain, fatigue, etc…)
- Advanced cervical dilation, GBS negative

Definitions below come from the American College of Obstetricians and Gynecologists revitalize project. [http://www.acog.org/About_ACOG/ACOG_Departments/Patient_Safety_and_Quality_Improvement/reVITALize](http://www.acog.org/About_ACOG/ACOG_Departments/Patient_Safety_and_Quality_Improvement/reVITALize)

Labor: Uterine contractions resulting in concomitant cervical change (dilation and/or effacement)
- Latent phase – from the onset of labor to the onset of the active phase
- Active phase – accelerated cervical dilation generally beginning at 5 cm for multiparous and at 6 cm for nulliparous

Comments:
- Avoid term 'prodromal labor'
- Is either spontaneous or induced
- Absolute % effacement or cervical dilation is not defined

PROM (Pre-labor rupture of membranes): Spontaneous rupture of membranes that occurs before the onset of labor.
Comments:
- Modified by gestational age categories (i.e. preterm or term)
- PROM (before labor onset) vs. ROM in early labor vs. PPROM (preterm pre-labor rupture of membranes)
- Renamed from Premature Rupture of Membranes

Augmentation of Labor: The stimulation of uterine contractions to increase their frequency and/or strength following the onset of spontaneous labor.
Comments:
- Implies that the onset of labor was spontaneous
- Does not apply if induction of labor is performed
- Applies if stimulation of existing uterine contractions following spontaneous ruptured membranes is performed

Induction of Labor: The use of pharmacological and/or mechanical methods to initiate labor.
Examples of methods include but not limited to: artificial rupture of membranes, balloons, oxytocin, prostoglandin, laminaria, or other cervical ripening agents.
Comments:
- Applies if any of the following are performed
  • Attempts at initiating labor even if unsuccessful
  • Initiation of labor following spontaneous ruptured membranes without contractions