

Table 19. Summary of Recommendations for the First Stage of Labor (ACOG/SMFM Obstetric Care Consensus³)

Summary of Recommendations ACOG/SMFM Obstetric Care Consensus Statement Safe Prevention of the Primary Cesarean (2014)
In the First Stage of Labor
A prolonged latent phase of greater than 20 hours in nulliparas and 14 hours in multiparas is not an indication for cesarean delivery
Slow but progressive labor is not an indication for cesarean delivery
Before 6 cm dilation, standards of active labor progress should not be applied to nulliparous or multiparous patients
Patients who undergo cesarean delivery for active phase arrest in the first stage of labor should be at or beyond 6 cm dilation WITH ruptured membranes AND: <ul style="list-style-type: none"> • 4 hours of adequate contractions without cervical change, OR • At least 6 hours of oxytocin with inadequate contractions and no cervical change

Table 20. Summary of Recommendations for the Second Stage of Labor (ACOG/SMFM Obstetric Care Consensus³)

Summary of Recommendations ACOG/SMFM Obstetric Care Consensus Statement Safe Prevention of the Primary Cesarean (2014)
In the Second Stage of Labor
An absolute maximum length of time for the 2nd stage has not been identified
As long as maternal and fetal condition permits, the diagnosis of arrest of labor in the 2nd stage should not be made prior to: <ul style="list-style-type: none"> • At least 2 hours of pushing for multiparous patients • At least 3 hours of pushing in nulliparous patients (Longer durations may be appropriate on an individualized basis, for example with epidural anesthesia or fetal malposition as long as progress is documented)
Operative vaginal delivery by an experienced, well-trained physician is a safe and reasonable alternative to cesarean delivery
Manual rotation of the fetal occiput of the malpositioned fetus in the 2nd stage of labor is a reasonable intervention to consider before operative vaginal delivery or cesarean delivery. Furthermore, assessment of fetal position in the 2nd stage of labor is essential, especially when abnormal descent is noted