

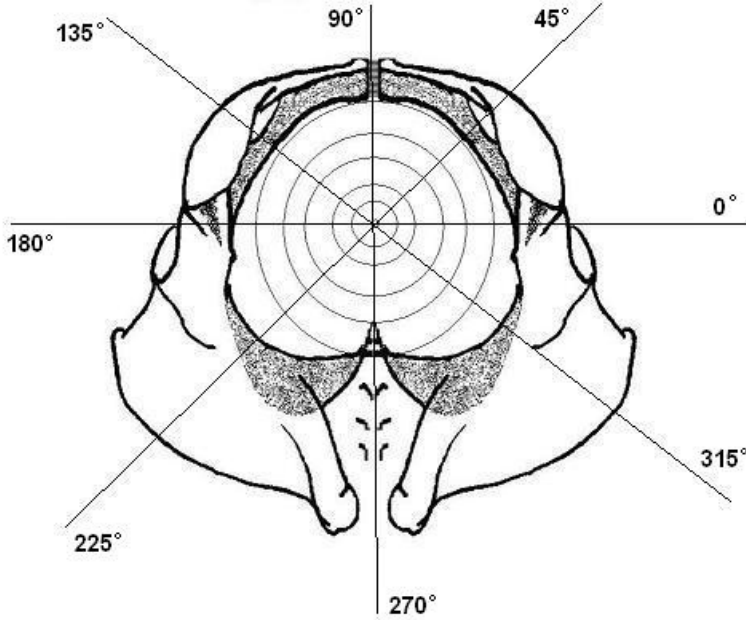
Fetal Presentation

Midwifery
Institute of
America

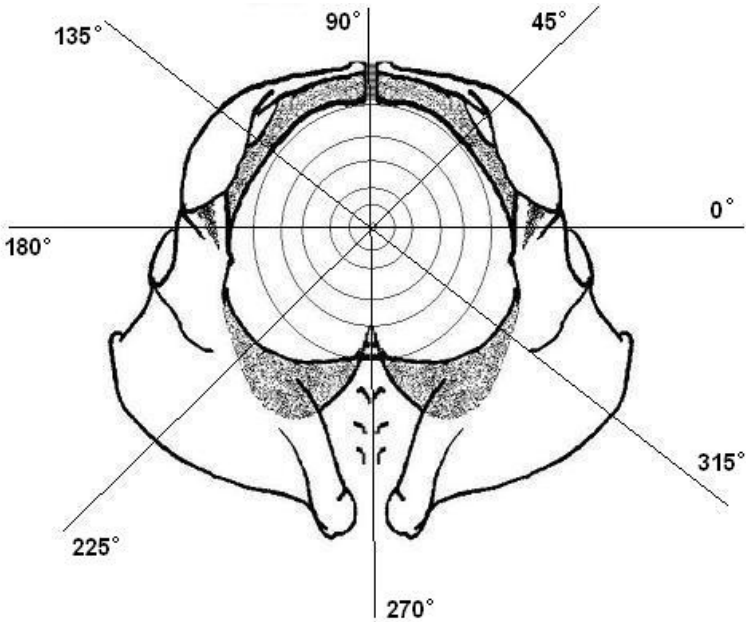
Name _____ PT ID# _____

DOB _____

Date _____



Draw in Suture lines. Δ = posterior fontanelle \diamond = anterior fontanelle



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Findings from Abdominal Palpation

Time of Exam _____ Date of Exam _____

Lie: Longitudinal Transverse Oblique

Fetal Part in Fundus _____

Fetal Part in Pelvis _____

Location of Fetal Back _____

If Cephalic Presentation amount of head above pelvic brim

Floating 4/5ths 3/5ths 2/5ths 1/5th cannot be felt

Overriding pubic bone

Side of Cephalic Prominence _____

Comments _____

Examiner: _____

Findings from Vaginal Exam

Time of Exam _____ Date of Exam _____

Effacement _____ Stretchy Firm

Dilation _____ Station _____

Presenting Part: Vertex Brow Face Breech _____

Presentation (LOA, LMA, FrP, SA, etc.) _____

Polar Coordinates:

Landmark _____ Radius _____ Angle _____

Landmark _____ Radius _____ Angle _____

Comments _____

Examiner: _____

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Comments _____

Examiner: _____