**NI Maternity Nursing Course**

**Clinical Skills Procedure**

**Procedure and Rubric: Leopold Maneuver**

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| **Step** | **Procedure** | **Yes** | **No** | **Remarks** |
|  | Take informed consent from the patient.(Inform about what, why, and how of the procedure) |  |  |  |
|  | Provide privacy (pull curtains, or close the door if the patient is comfortable with it). |  |  |  |
|  | Wash hands. |  |  |  |
|  | Expose the abdomen, only from the lower end of the sternum to the top of the symphysis pubis. |  |  |  |
| **Identify Fetal Lie and Presentation** |
|  | Stand facing the woman and establish height of the uterine fundus with both hands. (If hands are cold, rub them to warm before placing them on the patient’s abdomen.) |  |  |  |
|  | Using palms of hands on either side of the fundus, with fingers held close together palpate the upper part of of the uterus.Head feels hard and round, easily movable and ballotable)The breech feels soft, triangular and continuous with the body. |  |  |  |
| **Identify Fetal Lie and Position** |
|  | Then, place hands on the sides of the abdomen. |  |  |  |
|  | With right hand fixed, palpate with the left hand and vice versa.On one side there is the smooth, firm curve of the back of the fetus, on the other side, a rather knobbly feel of the fetal limbs. |  |  |  |
| **Identify Fetal Engagement and Presentation** |
|  | Grasp the lower area of the uterus, just above the symphysis pubis, between the thumb and fingers of one hand |  |  |  |
|  | Feel for the presenting part and assess its engagementIf the head is loose above the pelvis, it can be easily moved and balloted (not engaged) |  |  |  |
| **Identify Fetal Presentation and Attitude** |
|  | Now, stand facing towards the woman’s feet. |  |  |  |
|  | Place both hands at either side of the woman’s lower abdomen. |  |  |  |
|  | With the tips of the middle 3 fingers palpate deeply in the pelvic inletIf cephalic presentation, head can usually be readily palpated, unless it is already deeply in the pelvisDetermine the amount of the head palpable above the pelvic brim. |  |  |  |
|  | Then cover the woman’s abdomen with and explain to her the findings and their meanings.  |  |  |  |
|  | Wash hands.  |  |  |  |
|  | Document the assessment findings on the patient’s file. |  |  |  |

Reference:

Bettercare Learning Programmes/ Primary Maternal Care/ Antenatal Care/ 1b. Skills: Examination of the abdomen in pregnancy. Retrieved from: <https://bettercare.co.za/learn/primary-maternal-care/text/01b.html#1b-skills-examination-of-the-abdomen-in-pregnancy>

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