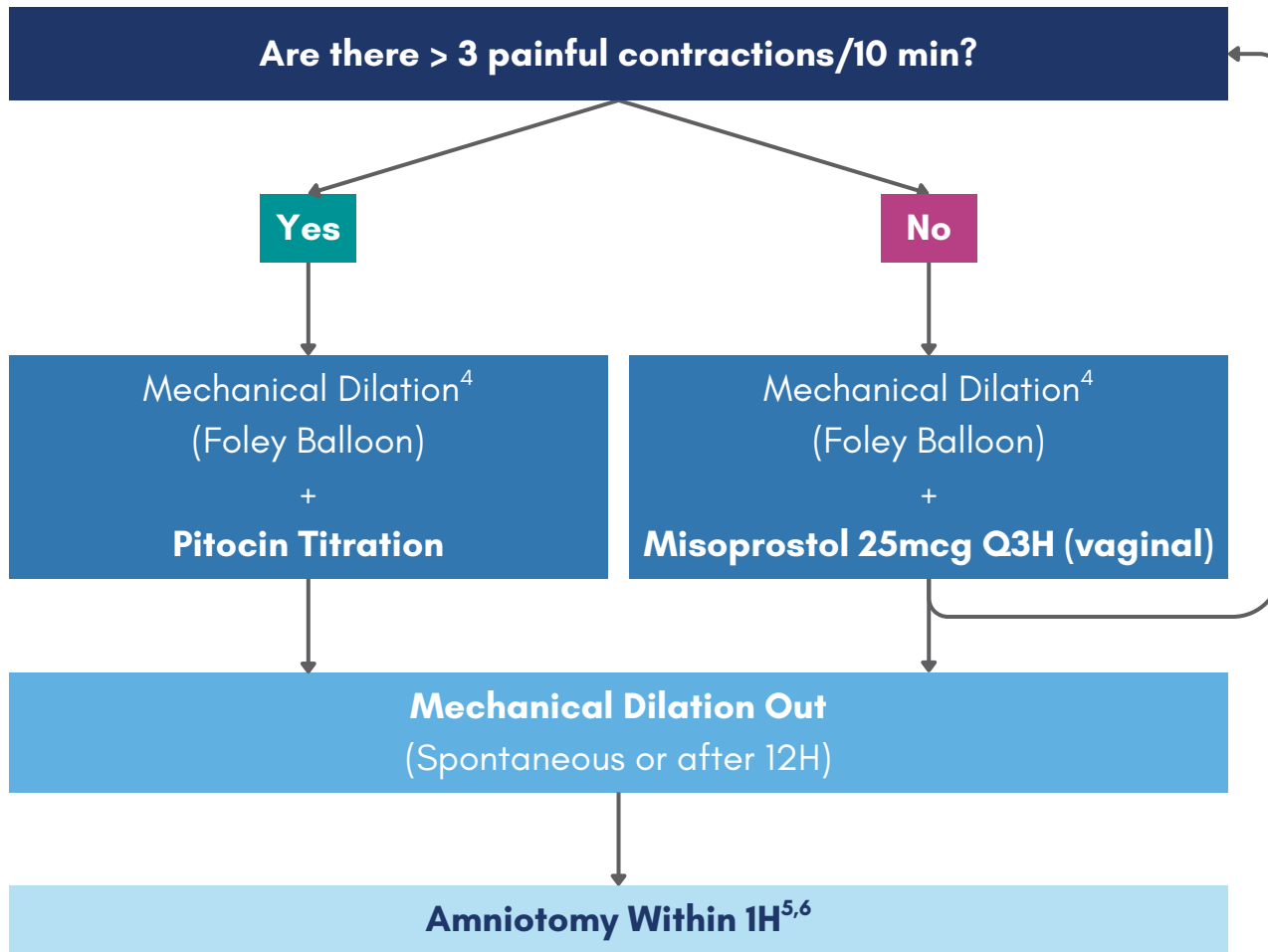


**Efficient Inductions, Safer Outcomes:** Longer inductions have increased risks.<sup>1</sup> Using evidence-based practices can shorten induction and may reduce complications.<sup>2,3</sup>

## OBI Algorithm for IOL Management for Patients $\leq 2$ cm



### REFERENCES

1



[PMID: 30414603](#)

2



[PMID: 33451623](#)

3



[PMID: 31645154](#)

4



[PMID: 27824758](#)

5



[PMID: 31398311](#)

6



[PMID: 35135684](#)

**Efficient Inductions, Safer Outcomes:** Evidence-based strategies with timely amniotomy and Pitocin titration shorten induction time and reduce risks such as postpartum hemorrhage.

## OBI Checklist for IOL Management

### ADMISSION

- TeamBirth huddle
- Confirm vertex
- First and subsequent vaginal exam membrane sweep

### CERVICAL RIPENING

- Misoprostol (prefer vaginal) and balloon at same time; or balloon as soon as possible after miso placement if cervix is closed
- Check every 3 hours with miso and place next dose

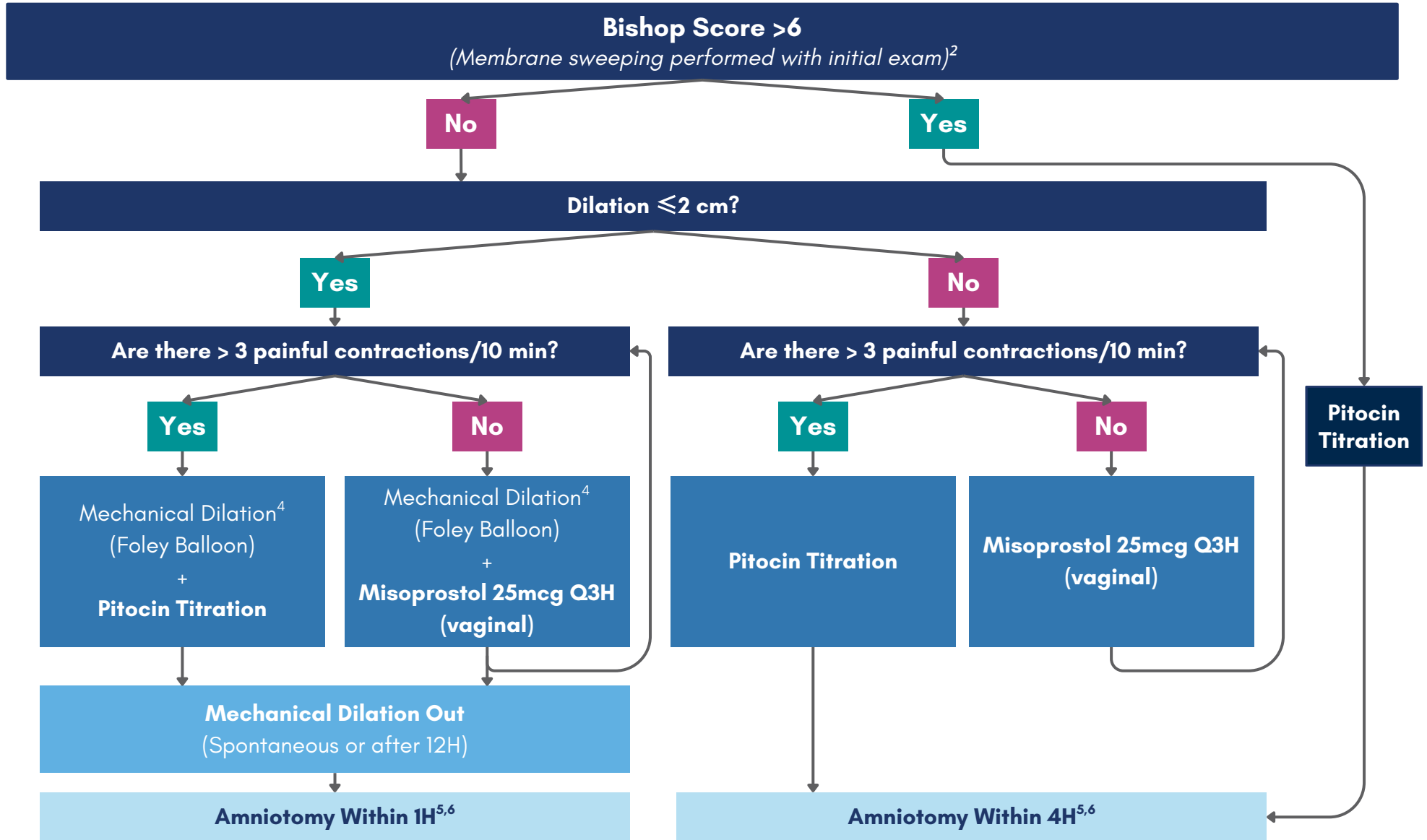
### CERVIX $\geq$ 3CM OR FOLEY BALLOON OUT

- Amniotomy within 1 hour of balloon out
- Pitocin start 4 hours after last miso dose; increase every 30 minutes until adequate contractions
- If not already done, AROM within 4 hours after Pitocin start

### ASSESSMENT FREQUENCY

- Check cervix every 2-4 until 6 cm
- Check cervix every 1-2 hours  $\geq$  6 cm

**Efficient Inductions, Safer Outcomes:** Longer inductions have increased risks.<sup>1</sup> Using evidence-based practices can shorten induction and may reduce complications.<sup>2,3</sup>



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