

ANESTHESIA FOR MATERNAL-ASSISTED CESAREAN DELIVERY

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Background

Maternal-Assisted Cesarean Delivery (MACD) is a modified cesarean technique wherein the birthing parent actively participates in the delivery of the infant. This method allows for increased involvement, and supports patient preferences, allowing for greater patient autonomy.

Case

35-year-old G4P3 woman with three prior CD was scheduled for repeat CD at 40w0d, requested a MACD prior to delivery



Preparation

- Protocol developed
- Patient counselling

Pre-op

- Mid-antebrachial IV
- Patient assisted with sterilization, gowning and gloving

Anesthetic

- ECG back pad
- Earlobe pulse oximetry
- Upper arm blood pressure cuff
- Combined spinal-epidural

Delivery

- After hysterotomy, drapes lowered; second gown removed
- Patient assisted delivering infant onto chest
- Delayed cord clamping

Discussion

Why MACD?

- 1 in three birthing people report trauma symptoms following delivery, which is often linked to the lack of choice and control.
- MACD empowers patients through active, hands-on participation.

Patient-centered care, without compromising safety

- Simple adaptations (IV placement, monitoring adjustments) allow MACD while maintaining standard surgical safety protocols.