Labour and birth management plan for women with cardiovascular disease

NOTES

This document will use the term ‘women’/‘woman’ throughout. It is important to highlight that it is not only those who identify as women who require access to women’s health and reproductive services. For example, some transgender men, non-binary people, and intersex people or people with variations in sex characteristics may also experience pregnancy. All healthcare services should be respectful and responsive to individual needs.

This guidance is not intended to be construed or to serve as a standard of care. Standards of care are determined based on all clinical data available for an individual case and are subject to change as scientific knowledge and technology advance and patterns of care evolve. Adherence to guidance recommendations will not ensure a successful outcome in every case, nor should they be construed as including all proper methods of care or excluding other acceptable methods of care aimed at the same results. The ultimate judgement must be made by the appropriate healthcare professional(s) responsible for clinical decisions regarding a particular clinical procedure or treatment plan. This judgement should only be arrived at following discussion of the options with the patient, covering the diagnostic and treatment choices available. It is advised, however, that significant departures from the national guideline or any local guidelines derived from it should be fully documented in the patient’s case notes at the time the relevant decision is taken.

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Contents

This document has been prepared by Public Services Delivery Scotland (PSD Scotland) on behalf of the Scottish Obstetric Cardiology Network (SOCN). Accountable to Scottish Government, PSD Scotland works at the heart of the health service providing national strategic services to the rest of NHS Scotland and other public sector organisations to help them deliver their services more efficiently and effectively. SOCN is a collaboration of stakeholders involved in obstetric cardiology care, who are supported by a PSD Scotland Programme Team to drive improvement across the care pathway.

Labour and birth management plan for women with cardiovascular disease

Many women with heart disease are at low risk of complication and their care should be in line with NICE guidelines for intrapartum care for healthy woman and babies[1]

Name: Click here to enter text. **CHI:** Click here to enter text.

EDD: Click here to enter a date. **Date of plan:** Click here to enter a date.

mWHO 2.0 Classification
Choose an item.

NYHA Classification
Choose an item.

Diagnosis:
Click here to enter text.

Relevant PMH:
Click here to enter text.

Previous Intervention:
Click here to enter text.

Relevant Investigations:
Click here to enter text.

Current Medication:
Click here to enter text.

Relevant Obstetric History:
Click here to enter text.

Place of Delivery: Choose an item.

Plan for Delivery:
Click here to enter text.

Pre-delivery Medication Plan (including anticoagulation):
Click here to enter text.

Pre-delivery Medical Device Plan:
(PPM or ICD)

Specific or Key Concerns:
Click here to enter text.

Escalation Plan:
Click here to enter text.

Delivery Plan:

Anaesthetic Technique: Choose an item.

Maternal monitoring: ☐ 16G IV access ☐ A-Line

☐ SpO2 ☐ ECG ☐ CVP Line

☐ Urinary Catheter

Fetal monitoring: ☐ Continuous CTG

Method of Induction: ☐ Mechanical

☐ Prostaglandins

Epidural: Choose an item.

Fluids: Choose an item. **Always commence fluid balance chart**

Management second stage:

Normal

☐ Short (30 mins)

Other (specify): Click here to enter text.

Management third stage:

Women with modified WHO 1 heart disease are low risk and can be offered the full range of care options for healthy women in third stage of labour.

Choose an item.

Other drugs to consider with careful consideration of clinical situation (see guidance - Uterotonic drugs for the third stage of labour in women with cardiovascular disease www.socn.scot.nhs.uk):

☐ **Misoprostol** ☐ **Ergometrine** ☐ **Haemabate (IM only)**

☐ **Tranexemic acid**

Remember mechanical methods:
Compression suture
Intra-uterine balloon
Interventional radiology
Major obstetric haemorrhage protocol to be triffered in EBL>2000 ml
Call 2222

Post Delivery Management

Location: Choose an item.

LMWH Indicated: Choose an item.

LMWH dose: Choose an item.

LMWH Duration: Choose an item.

Minimum post-natal length of stay: Click here to enter text.

Medication plan post- delivery: Click here to enter text.

Contraceptive plan: Click here to enter text.

Post-natal cardiac review required: Choose an item. **Date:** Click here to enter a date.

Copy discharge letter to cardiology

IN AN EMERGENCY OR UNSTABLE PATIENT
PHONE 2222 : ASK FOR OBSTETRIC EMERGENCY TEAM AND/OR CARDIAC ARREST TEAM

Important Contact Details if concerns
Consultant Obstetrician on call: #
Obstetric Registrar on call: #
Consultant Anaesthetist on call:
Anaesthetic Registrar on call: #
Dr Cardiologist :
Cardiology on call: via switch board
Dr Obstetrician: 1224

Resources

Pregnancy & Post-Partum Management for Women with Cardiovascular Disease
www.socn.scot.nhs.uk

Intrapartum care for women with existing medical conditions or obstetric complications and their babies. NICE guideline [NG121] Published date: March 2019
www.nice.org.uk/guidance/ng121

2025 ESC Guidelines for the management of cardiovascular diseases during pregnancy. *European Heart Journal*, 46(43)
https://doi.org/10.1093/eurheartj/ehaf193

Anaesthetic Care of the Pregnant Patient With Cardiovascular Disease: A Scientific Statement From the American Heart Association Pages 3165–3241
https://doi.org/10.1161/CIR.0000000000001121

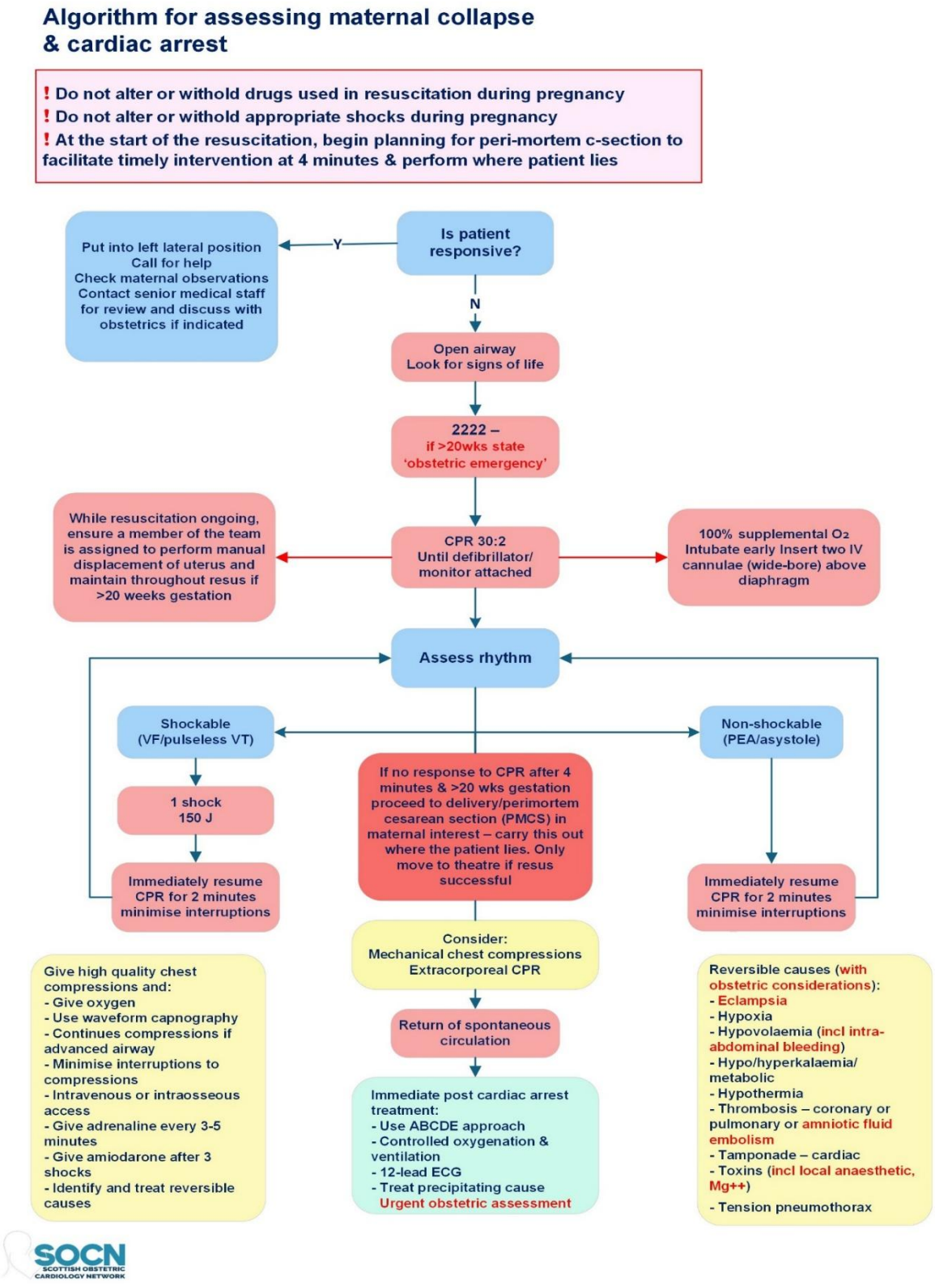
Transthoracic Echocardiographic Assessment of the Heart in Pregnancy—a position statement on behalf of the British Society of Echocardiography and the United Kingdom Maternal Cardiology Society
https://echo.biomedcentral.com/articles/10.1186/s44156-023-00019-8

References

1 Intrapartum care for women with existing medical conditions or obstetric complications and their babies. NICE guideline [NG121] Published date: March 2019
www.nice.org.uk/guidance/ng121

2 Table 6, 2025 ESC Guidelines for the management of cardiovascular diseases during pregnancy. *European Heart Journal*, 46(43)
https://doi.org/10.1093/eurheartj/ehaf193

Appendix 1 - Algorithm for assessing maternal collapse and cardiac arrest



Appendix 2 - Document governance

Authors	This document was developed by the Known Pathways Subgroup on behalf of the SOCN Steering Group. Full membership of the group is available in Appendix 3.
Stakeholders involved	A wide range of health care professionals working in the area of obstetric cardiology were involved in the development of this document. This includes Obstetricians, Cardiologists, Anaesthetists, Pharmacists, Clinical Geneticists, Specialist Nurses, Midwives and Sexual Health consultants. Feedback from patients throughout the development of all of the SOCN materials was sought.
Methodology used	Evidence-based literature reviews and engagement with clinical experts within the field of obstetric cardiology across Scotland.
Rationale	Cardiac disease remains the leading indirect cause of death in pregnancy. The network was established to support and develop Obstetric Cardiology services throughout Scotland in improving standards of clinical care for pregnant women and their families affected by heart disease in pregnancy. The network supports the delivery of evidence based, patient centred care for both mother and baby through the development and implementation of clinical guidelines, care pathways, clinical standards and information resources.
Scope	The aim of this document is to support the delivery of services to improve outcomes for women with cardiac disease and support implementation of optimal care to any women with a cardiac condition who is contemplating a pregnancy or has a pregnancy in Scotland. .
Approval process	Members of the Scottish Perinatal Network and Network for Inherited Cardiac Conditions Scotland were able to review and provide feedback on the final draft of this document. The SOCN Steering Group endorsed this document on 30 April 2026. Full membership of the group is available in Appendix 3.

Network contact details

nss.socn@nhs.scot

Appendix 3 - Group membership

Known Pathways Subgroup Membership		
Name	**Job Title**	**Organisation**
Dr Julia Anderson	Consultant Haematologist	NHS Lothian
Dr Sonal Anderson	Consultant in Obstetrics & Gynaecology	NHS Ayrshire & Arran
Dr Katrina Bramley	Consultant Anaesthetist	NHS Lothian
Dr Adelle Dawson	Consultant Cardiologist	NHS Grampian
Dr Fiona Dennison	Consultant Obstetrician	NHS Ayrshire & Arran
Dr Richard Dobson	Cardiology Registrar	NHS Golden Jubilee
Jacqueline Dunlop	Principle Genetic Counsellor	NHS Tayside
Dr Stuart Hanna	Consultant Anaesthetist	NHS Forth Valley
Mary Hannaway	Senior Charge Midwife	NHS Greater Glasgow & Clyde
Dr Shahzya Huda	Consultant Obstetrician/Sub-group Chair	NHS Forth Valley
Dr Jayne Mclaren	A&E Consultant	NHS Ayrshire & Arran
Dr Lucy Michie	Obstetrics & Gynaecology Registrar	NHS Ayrshire & Arran
Dr Giles Roditi	Consultant Radiologist	NHS Greater Glasgow & Clyde
Maggie Simpson	Lead Clinician	NHS Golden Jubilee
Dr Caroline White	Consultant Cardiologist	NHS Lanarkshire

SOCN Steering Group Membership (2025/2026)		
Name	**Job Title**	**Organisation**
Dr Ros Burns	Obstetric Anaesthetist	NHS Lothian
Dr Rachel Darling	Consultant Anaesthetist	NHS Greater Glasgow & Clyde
Richard Forsyth	Health Systems Insights Manager	British Heart Foundation
Dr Patrick Gibson	Consultant Cardiologist	NHS Lothian
Dr Anja Guttinger	Sexual & Reproductive Health Consultant	NHS Ayrshire & Arran
Dr Duncan Hogg	Consultant Cardiologist	NHS Grampian
Dr Shahzya Huda	Consultant Obstetrician	NHS Forth Valley
Dr Vera Lennie	Consultant Cardiologist	NHS Grampian
Dr Lynn Miller	Consultant Cardiologist	NHS Fife
Lynsey Moir	Pharmacist - Clinical Cardiology	NHS Greater Glasgow & Clyde
Dr Rebecca Northridge	Consultant Obstetrician	NHS Tayside
Dr Karolina Pesz	Consultant Geneticist	NHS Greater Glasgow & Clyde
Maggie Simpson	Advanced Specialist Nurse	NHS Greater Glasgow & Clyde
Dr Lorna Swan	Consultant Cardiologist	Golden Jubilee National Hospital
Dr Niki Walker	Consultant Cardiologist	Golden Jubilee National Hospital