

HOW DO I KNOW IF I AM IN LABOR?

Some women have very distinct signs of labor; other women have a harder time distinguishing between Braxton Hicks contractions or false labor and true labor. False labor is common and may be uncomfortable and exhausting. The table below is a comparison of true and false labor that you may find helpful.

True Labor	False Labor
Contractions are at regular intervals and get closer together over time.	Contractions are irregular and do not get closer together.
Contractions increase in duration and intensity.	Usually no change.
Discomfort usually begins in back and radiates around to the abdomen.	Discomfort is usually in the front of the abdomen.
Intensity usually increases with walking and with changing position. Does not stop when change position or rest.	Walking has no effect on or lessens contractions, may stop if change position.
Cervical dilatation and effacement are progressive.	No change.

If you are experiencing false labor, this does not mean that you won't go into real labor in the next 24 hours. Therefore, you are encouraged to rest, eat a well-balanced diet, and drink at least eight glasses of water per day.

Call your doctor if you notice:

- Bright red vaginal bleeding (you may have a small amount of pink or brown spotting following a vaginal examination).
- Contractions that become increasingly strong and occur every five to ten minutes.
- A gush or trickle of fluid from your vagina that cannot be stopped.
- Baby's activity decreases noticeably.
- Fever greater than 100.4 degrees.

Keep your scheduled appointments with your physician.

This information should not take the place of visiting with your healthcare provider. If you have any questions or concerns, please call the clinic at 712.755.5130 or the hospital at 712.755.5161 and ask to speak to a mother/baby nurse.