

Twin Birth Story

Midwives all but dropped me 3 PM Fri.

Met Dr. Christensen 7:30 PM Fri.

He accepted me. I declined induction even though I was WELL above the “score” they use for readiness (3 CM, 70%, 0 station, multip, 38 w 2d).

He was more than OK with that and with the plan we came up with.

First contraction 4:30 Sat AM. RACED to Lakeside (he could NOT have done this at Highland, where he also has privileges, he said).

Arrival 5:50, checked in 5:57 according to my bracelet.

Noted that team was in place on my way into my room including anesthesiologist I met with the night before. Means he BELIEVED me when I called and said “three contractions, 10 minutes apart, I’m clearing out, I need to come in NOW and it’s going to be fast”. No contractions for 10 mins.

Checked at about 6:05 and declared “complete”.

Dr. Christensen rocked quietly in a chair behind me across the LDRP (NOT an OR!!!) room through 3.5 contractions I was hands and knees on bed. No one bothered me at all beyond checking dialation and heart tones.

3.5 contraction he calmly got up, walked over, caught baby A as it flew out (and my water popped ALL over him, a nurse, and half the room apparently).

Flipped over for ultrasound. B declared vertex, shockingly. Was offered to be on hands/knees again.

Four contractions like that. I knew B wasn’t coming and said so. Checked, hand felt.

Flipped over for another ultrasound, transverse, hand presenting. Lots of manipulation, VERY calm. Urgency sensed, but not voiced or shown.

Amniotomy performed, reached in, feet grabbed and moved to birth canal. Pushing encouraged strongly, but without panic.

Chest out, cord unwrapped, hands hooked out, pushing again encouraged strongly, without panic, without raised voices.

B out in less than 90 seconds from amniotomy. Apgars 6 and 8.

I needed a Pit IV after birth and the arm still aches

He is a wonderful, fantastically calm and gentle man who believes in birth – he’s also young – not much older than me and I’m 32. He’s had some experience with HB transfers being belligerent.

He wanted to make clear to me he's bound by hospital policies (Lakeside is better for that than Highland) and his malpractice insurance, and there's nothing he can do about that because he wants to keep practicing. He doesn't believe in sections without fetal distress. I'm not sure he'd deliver a singleton breech, but it'd be worth asking (even Lakeside may not allow it). I will ask at my followup, in fact, and get back to you. I HIGHLY recommend him from the short time I've known him BUT want to make clear to people that this is someone we need to keep on our "side". He does what he can within his restraints placed on him in order to keep working and doing what he does. It'd be good to work with him, assume positive intent – KWIM? I don't want people going to him and trying to get him to do things that are beyond that scope since his views may change and he may not be so willing to work with people. That would be a real shame.

Jean