

California College of Midwives  
State Chapter ~ American College of Community Midwives

Definition of Physiological Management of Normal Labor & Birth

Science-based principles of care for spontaneous labor and normal birth care include the following physiologically-sound practices:

**Physiological:** "...in accord with, or characteristic of, the normal functioning of a living organism (Stedman's Medical Dictionary – 1995)

1. Continuity of care
2. Patience with nature
3. Social and emotional support
4. Full-time presence of the primary caregiver during active labor
5. Mother-controlled environment (place) for labor and birth
6. Provision for appropriate psychological privacy (persons present)
7. Mother-directed activities, (positions & postures) for labor & birth
8. Opportunity for an upright and mobile mother during active labor
9. Recognition of the non-erotic but none-the-less sexual nature of spontaneous labor & normal birth
10. Non-pharmaceutical pain management such as walking, one-to-one care, touch relaxation, showers & deep water tubs, other tradition midwifery strategies
11. Judicious use of drugs and anesthesia when needed (for hospitalized women)
12. Absence of arbitrary time limits as long adequate progress, mom & babe OK
13. Vertical postures, pelvic mobility and the right use of gravity for pushing
14. Birth position by maternal choice unless medical other factors require otherwise
15. Mother-Directed Pushing - NO prolonged breath-holding (Valsalva Maneuver)
16. Physiological clamping/cutting of umbilical cord - after circulation between baby and placenta has stopped (average 3-6 minutes)
17. Immediate possession and control of healthy newborn by mother and father
18. On-going & unified maternity care and support of the mother-baby during the postpartum/postnatal period

Physiological management is the science-based model of normal maternity care. Logically-speaking, it should be the foremost standard of care for all healthy women with normal pregnancies, regardless of the category of maternity care provider (obstetrician, family-practice physician or midwife) and regardless of the setting for labor and birth (hospital, home or birth center).