



Advocacy Induction of Labour Form for Women

Woman's Name:

Reason for Induction/Labour Augmentation:

Birth Support:

Date of Admission:

	Time and comment	Provider Name/AHPRA registration number
Did the provider explain the rate of Syntocinon Dosage Per Hour? What is the clinical reason for dosage?		
Did the provider gain informed consent for Vaginal Exam/Fetal Scalp Monitoring or Breaking your Waters?		
Did the provider gain informed consent for uterus palpitation?		
Did the provider give informed consent for CTG Trace? Foetal Heart Rate, Contraction Length, and Frequency?		
What is the fetal variability, baseline and key features?		



Are any other medications or examinations being done or requested?

Document below the names of medications/procedures and the clinical reason for why the provider wants to administer/perform them for informed consent purposes.

Take a time stamped picture of the form and send it to your email every time you fill something out.



Role of This Form

The advocacy induction of labour form is intended as a supportive tool to assist birthing women and their support (not including trained support, such as doulas) in documenting key aspects of the labour process. This form is not intended for use by clinically trained practitioners, or professional birthing support. Its primary functions are to enable birthing women and their informal, or familial support to record informed consent, track adherence to medical guidelines, and facilitate clear communication between the birthing woman, her support, and healthcare providers during labour.

This form aims to ensure that the expectant mother's decisions are well-informed and documented and to reflect upon compliance with established care protocols. The form is designed to complement, not replace, direct communication and clinical judgment. It provides a structured way for the birthing woman and her familial support to document consent to procedures and interventions during labour, ensuring that her autonomy and preferences are respected. Additionally, the form serves as a practical record of whether healthcare providers have followed relevant consent guidelines, offering a transparent account of the care provided.

Support and patients should understand that this form is to be used only as a supplementary tool for reflection within the care process. It is not intended to be a comprehensive record of all medical actions or decisions, nor should it be seen as a directive for care or a definitive legal document. Instead, it should be used to enhance the clarity and transparency of the care provided, ensuring that key decisions and consents are reflected upon, and recorded.

The form's utility lies in its ability to foster transparency and understanding during labour. By using this form, patients can actively participate in their care, ensuring that their questions are answered and their consent is clearly documented.

We recommend that you share with your health care provider that you plan to use this form during labour. Explain that you intend to do so to ensure that you are fully informed and that your consent is properly documented throughout the birthing process. Use the form collaboratively, not confrontationally.



Legal Disclaimer

This form is not intended to replace or substitute professional medical advice, judgment, or care. Users of this form should consult with their health care provider prior to labour to discuss the form's use and to ensure that it aligns with their individual care plan.

The creators of this form do not provide medical advice. The content of this form is based on general guidelines and is not tailored to the specific medical circumstances of any individual.

Any information recorded on this form should be based on discussions with, and information provided by, your healthcare provider. Users should not rely on this form for making medical decisions.

This form does not provide legal advice or establish any legal rights or obligations. The documentation recorded on this form may be subject to legal scrutiny in the event of a dispute, but its use does not guarantee any legal outcomes. Users are advised to consult with a qualified legal professional if they have any questions or concerns regarding legal implications of using this form.

Users are responsible for ensuring that all entries in the form accurate, objective, and based on factual information provided by healthcare professionals. While this form is intended to support clear communication and informed decision making, there is a risk that its use could lead to conflicts with health care providers, especially if there are disagreements over care decisions.

Users are expected to discuss any concerns privately with their health care provider and take all steps to avoid creating tensions during labour. The creators and distributors of this form disclaim any and all liability for actions taken or not taken based on the content of this form or the information recorded within it. By using this form, users acknowledge and agree that they assume full responsibility for its use and any consequences that may arise.

The information recorded on this form is sensitive and should be treated as confidential. Users are responsible for ensuring that form is stored securely and that any copies or backups are protected to prevent unauthorised access.

Information in the manual and the form is based upon clinical guidelines current as of [25/8/2024]. Guidelines may change over time, and users are advised to consult the most up-to-date information and professional advice.

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