

**University of Iowa  
Hospitals & Clinics**  
Department of Nursing  
Services and Patient Care  
Nursing Clinical Education Center  
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**Date:** February 6, 2021  
**Time:** 8:00AM - 4:00PM  
**Location:** East Room, UIHC

**Intended Audience:**  
Nurse Midwives, ARNPs, RNs  
**Fees & Credits:**  
There is no registration fee for staff to attend this course or to receive optional CE contact hours.

**7.0 contact hours** will be granted by UIHC Department of Nursing (IBN Approved Provider #34). Participants must attend the entire program to receive full credit.

Pre-registration is required, and can be found at <https://www.spinningbabies.com/events/>

Contact: Nicole Anderson at [nicole-anderson@uiowa.edu](mailto:nicole-anderson@uiowa.edu) or phone 319-384-6868 with additional questions.

# Spinning Babies Workshop

**Sponsored by:** Division of Midwifery, Department of Obstetrics and Gynecology

**Speaker:** Tammy Ryan, AdvCD/BDT (DONA), SpBT, Midwifery Assistant

**Purpose/Description:** Discuss the role of muscles and ligaments in preparing for birth, and supporting labor progress. Posterior, Deflexed, Transverse lie, and Cephalo Pelvic Disproportion are re-examined in this new physiology. Options are discussed to reduce unnecessary cesareans due to lack of progress in labor.

## Objectives:

1. Compare cardinal movements of the flexed Left Occiput Transverse (LOT) baby to extended Right Occiput Transverse (ROT) baby. Describe the role of three soft tissue structures on fetal position (Make room for baby)
2. Design a pregnancy protocol (movement routine) for all pregnant person's comfort and pelvic stability
3. Create a Myofascial routine for releasing tight or spasmed muscles within and to the pelvis (Balance).
4. Explain contraindications for steep inversion
5. Demonstrate the Side-lying Release
6. Differentiate a progressing from non-progressing labor pattern and symptoms
7. Describe current research on Occiput Posterior presentation effects on birth outcomes
8. Explain to a pregnant parent an external self-assessment to detect a lack of engagement from an overlapping forehead
9. Compare an indication for cesarean delivery due to cephalo-pelvic disproportion from indications that baby can rotate to fit the pelvis
10. Choose a maternal position to increase the diameter of each pelvic level (inlet, mid, outlet) to encourage rotation and/or descent (Gravity)
11. Write a plan of implementation for the Spinning Babies approach in a practice scenario

Individuals with disabilities are encouraged to attend all University of Iowa-sponsored events. If you are a person with a disability who requires an accommodation in order to participate in this program, please contact the Department of Nursing in advance at (319) 356-1238.

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## **Outline for 7-hour Spinning Babies Workshop:**

I.	Introducing a new question. (10 minutes)	0800
	a. Welcome, agenda, safe space rules, housekeeping, gratitude to venue and host, parking lot, acknowledge wisdom of the group.	
	b. Objectives	
II.	Compare cardinal movements of the flexed LOT baby to extended ROT baby (35 min)	0810
	a. Premise of Spinning Babies	
	b. Flexion (Demo/return Demo)	
	c. Extension (Demo/return Demo)	
	d. Cardinal Movements of labor with a Left Occiput Transverse position	
	e. Cardinal Movements of labor with a Right Occiput Posterior position	
III.	Anatomy of Birth (30 min)	0845
	a. Soft tissue relationship to space available	
	b. Connecting muscle tension	
Break		0915
IV.	Create a physical self-care program for pregnant person's comfort and pelvic stability (Daily activities). (30 min)	0930
	a. Describes the role of three soft tissue structures on fetal position	
	b. Designs a pregnancy protocol (movement routine) for all pregnant person's comfort and pelvic stability (Demo/return Demo)	
V.	Design a Myofascial routine for releasing tight or spasmed muscles within and to the pelvis for pregnancy and labor (The Three Sisters of Balance). (60 min) (Demo and return Demo)	1000
	a. Rebozo Manteado (Sifting) for comfort, relaxing the broad ligament	
	b. Cultural respect for traditions beyond the authoritarian knowledge base	
	c. Lists contraindications for steep inversion	
	d. Side-lying Release and muscles which may be released	
VI.	Belly Mapping (30 min)	1100
	a. Three-step process for pregnant person in third trimester	
	i. Bonding in pregnancy (binding-in)	
	ii. Approximates fetal position with clues in self examination	
	iii. Expands provider's awareness in palpation	
	b. Teach a pregnant parent an external self-assessment to detect a lack of engagement from an overlapping forehead	
Lunch		1200
VII.	Application of Our New Question, "Where's Baby?" (60 min)	1300
	a. Differentiate a progressing from non-progressing labor pattern	
	b. Describe current research on Occiput Posterior effects on birth outcomes	
	c. Compares signs for a necessary cesarean delivery to need for rotation	
	d. Station rather than dilation	
VIII.	Pelvic Levels Solutions (120 min)	1400
	a. Engagement in the Inlet (Demo/return Demo)	
	i. Start and stop contraction pattern and high station	
	ii. Posterior forehead overlap	
	iii. Opening the inlet with maternal positioning	
	b. Midpelvis (Demo/return Demo)	
	i. Pelvic floor issues	
	ii. Deep Transverse Arrest	
	iii. Opening the midpelvis with maternal positioning	
	c. Outlet (Demo/return Demo)	
	i. Maternal position and preference politics	
	ii. Posterior and pushing	
	iii. Opening the outlet with maternal positioning	
	iv. Measuring your own outlet	
IX.	Write a plan of implementation for the Spinning Babies approach in a practice scenario. (20 minutes) (Group activity)	1530
X.	Conclusion (10 minutes)	1600
	a. Evaluation	
	b. Certification of Attendance	