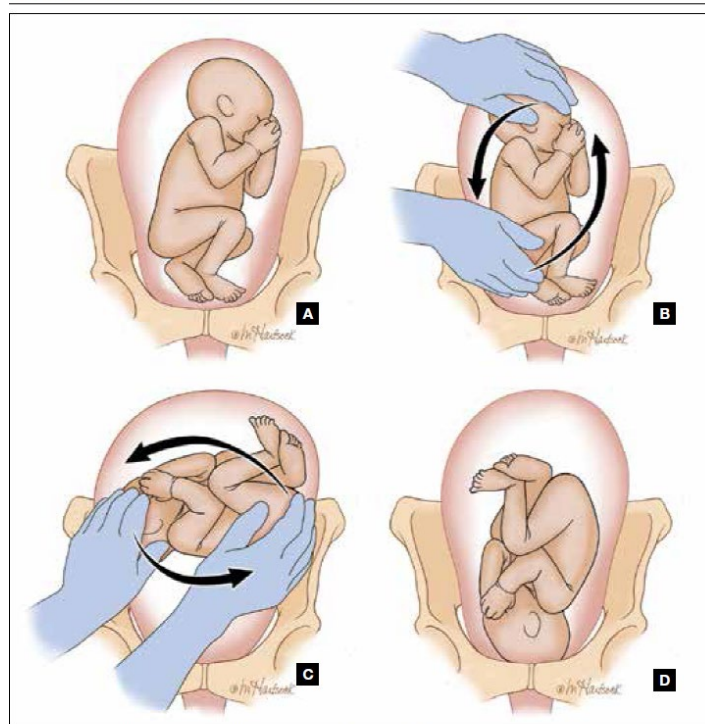




What is an External Cephalic Version (ECV)?

This is an optional procedure offered during your 37th week of pregnancy or later. The goal of ECV is to turn a breech (buttocks down) baby to a head down (vertex) position to improve your chances of having a vaginal birth. Your provider will attempt to rotate the baby's position by putting their hands on your belly. This procedure is done in the Birth Center.

FIGURE External cephalic version technique



In external cephalic version, the clinician externally rotates a breech- or transverse-lying fetus to a vertex position. The illustration shows a backflip rotation maneuver. The American College of Obstetricians and Gynecologists recommends a forward rotational maneuver be attempted first.

Source: Koutrouvelis GO; American College of Obstetricians and Gynecologists' Committee on Practice Bulletins—Obstetrics. Practice Bulletin No. 161: External cephalic version. Obstet Gynecol. 2016;127(2):e54–e61.

What do I need to do before my ECV?

1. You will need to have your blood drawn within 3 days of your ECV. Go to one of the Michigan Medicine MLab locations to get your blood drawn. To find a location scan the QR code or visit:

<http://michmed.org/jO40w>



- You do not need an appointment.
2. You will get a phone call the afternoon before your scheduled ECV with the time you need to arrive in the Birth Center Triage.
 3. Do not eat any solid food (including gum, hard candy) for 8 hours before your ECV.
 4. Take a shower with antibacterial soap and water on the morning of your version.
 5. You may drink water or clear liquids until 2 hours before admission.
 - Clear liquids include:
 - Black coffee
 - Black tea
 - Gatorade
 - Clear juices
 - **No** milk, cream, or honey.
 6. Do not wear cosmetics, nail polish, or jewelry. Please leave all valuables at home.

What will happen during my ECV?

1. When you arrive to Birth Center Triage, a nurse will take you to an area near the Operating Rooms where your ECV will be performed.
2. An ultrasound will be done to check your baby's current position.
3. A fetal monitor will be placed on your belly to check baby's heartbeat and check for contractions.
4. An IV will be started.
5. Your doctor may recommend a medication to relax your uterus which will make turning your baby easier.
6. One or two doctors will put their hands on your belly and try to turn the baby head down (vertex).
7. You and your baby will be monitored after your ECV for 30 minutes to 1 hour.

8. If the ECV does not change your baby's position, the doctor will talk about future plans for delivery.

If you have additional questions, please call the clinic at (734) 763-6295 or triage at (734) 764-8134.

Disclaimer: This document contains information and/or instructional materials developed by Michigan Medicine for the typical patient with your condition. It may include links to online content that was not created by Michigan Medicine and for which Michigan Medicine does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition or your treatment plan.

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