The PROMPT Flex Labor Progress Simulator provides a versatile cervical dilation and effacement training solution, for assessing both the latent and active first stages of labor.

**Skills**

- Competency in:
  - Cervical dilation (1-10cm)
  - Cervical effacement (0-100%)
  - Cervical consistency (soft, medium, hard)
  - Cervical position (anterior, mid, posterior)
  - Fetal station (-3 to +3)
  - Head position: occiput anterior, occiput posterior
- Artificial rupture of membranes
- Identification of presenting parts - brow, face, breech
- Caput and molding
- Communication and teamwork skills
- Bishop’s scoring
- Identification of approximated or overriding sutures

**Features**

- Inserts to represent early labor cervixes - effacement, dilation and ripeness in line with Bishop’s scoring
- Dynamic positioning mechanism allows adjustment of dilation in active labor
- Markers allow tutor to read positioning in situ
- Numerous presenting part inserts including flexed, deflexed, brow, face, breech, caput and molding
- Realistic pelvic floor
- Stretchable perineum
- Soft, flexible birthing canal

**Package supplied**

- **80120** Birthing Mother (+Upper Legs)
- **80124** Abdomen for PROMPT Flex
- **80102** PROMPT Flex - Cervical Dilatation & Effacement Module
- Carry case
Components

Birthing Mother (with Upper Legs)
Product No: 80120

Abdomen for PROMPT Flex
Product No: 80124

Perineum for PROMPT Flex
CDE and C-Section Modules
Product No: 80138

Pelvic Ring
Product No: 80139

Static Rig
Product No: 80140

Dynamic Rig
Product No: 80141

Set of 7 Latent Labor Cervixes
Product No: 80142

Dynamic Cervix
Product No: 80143

Set of 5 Presenting Parts
Product No: 80144

Set of 2 Difficult Labor Heads
Product No: 80145

Amniotic Membrane Set
Product No: 80146

Set of 3 Caput
Product No: 80162
1. Remove PROMPT Flex Abdominal Skin from the PROMPT Flex Unit

2. Remove the Pelvic Ring Clamp from the PROMPT Flex Unit
Remove the Cervix if present

Remove the birth canal and perineum by firstly detaching the perineal skin from the poppers on the mother unit, then carefully feed the birth canal through the pelvis.

Once the top half of the perineum has been detached from the unit, detach the skin from the poppers on the bottom of the mother unit.
The perineum is now in place. Some adjustment to the inside of the birth canal may be required to ensure it is seated properly in the pelvis.
**Static Rig set up**

1. Fit the Cervical Dilatation Pelvic Ring
2. Select the Static Rig
3. Choose presenting part and fit to the Static Rig. Boss shape allows only one-way fitting, so that presenting part is always fitted with occiput/back of head aligned with arrow on head plate
4. Align and fit the bottom of the presenting part first
Fitting Cervix

**Step 1**
Once the presenting part has been fitted to the Static Rig, select cervix. Choose one of the six cervixes representing 0-4cm dilation.

**Step 2**
Place the chosen cervix over the presenting part. A small amount of lubricant on the inside of the cervix will aid fitting.

**Step 5**
Firmly press the presenting part into place on the Static Rig.

**Step 6**
Presenting part can be used with or without a cervix. You would not use a cervix if you were simulating full dilation. If using without cervix, lubricate head prior to positioning in birth canal.
Stretch the chosen cervix over presenting part in the Static Rig.

Ensure that the cervix covers the presenting part and that the edges fold around the base of the presenting part.

The cervix is now fitted.

Lubricate the outer surface of the cervix prior to positioning the rig in the birth canal.
Lubricate birth canal

Press the button on either side of the Static Rig and with the presenting part facing down, fit the two gaps on the Static Rig (next to the buttons) over the cervical dilation pelvic ring.

Once fitted, press the buttons on either side of the Static Rig to adjust the station (-3 - +3).
Adjust cervical position (tilt) by pulling the lever on the positioning rod and moving along the notched guide. The position of the rod gives degrees of positioning between anterior, mid, and posterior.

Adjust foetal position (rotation) by rotating the cervix. The arrow on the boss plate always points to the direction of the occiput (the back of the baby's head).
Dynamic Rig set up

1. Fit the Cervical Dilatation Pelvic Ring
2. Select the Dynamic Rig and follow steps 3 - 5 in the Static Rig set up
Fitting Dynamic Cervix

1. Rotate the rear end of the Dynamic Rig
2. This will make it easier to attach the cervix
3. Gently press down with thumbs on the two tabs, and place fingers between the two rings
4. Gently pull the top ring away from the bottom ring to separate
Repeat this process on the other side of the Dynamic Ring, and separate the two rings.

Now that the two rings are separated, turn the knob clockwise until the bottom ring rests just below the presenting part.

The Cervix is now ready to be fitted.

Lubricate the presenting part.
Select the Cervix

Place the Dynamic Cervix over the presenting part

Stretch the Dynamic Cervix over presenting part in the Dynamic Rig. Ensure that the cervix covers the presenting part and that the edges fold around the base of the presenting part and the bottom ring.
The top ring can then be clicked into place and secures the Dynamic Cervix in place.

Alternatively, to change the presenting part, peel back the Dynamic Cervix to swap over.

* Lubricate liberally between the presenting part and cervix before use.
Lubricate birth canal as shown and between the cervix and presenting part.

Press the button on either side of the Dynamic Rig and with the presenting part facing down, fit the two gaps on the Dynamic Rig (next to the buttons) over the Cervical Dilatation Pelvic Ring.

Once fitted, press the buttons on either side of the Dynamic Rig to adjust the station (-3 - +3).

Adjust cervical position (tilt) by pulling the lever on the positioning rod and moving along the notched guide. The position of the rod gives degrees of positioning between anterior, mid, and posterior.
The Dynamic Cervix stretches from 4 – 10cm dilated.

Sometimes when dilation is changed from between 8-10 to a lower setting, the cervix can catch and concertina. To remedy this, run your finger round the cervix with some lubricant. This can be done with the Dynamic Rig fitted in the model, or when it is separate from the model.

Turn the knob clockwise to enlarge or anticlockwise to narrow down.
How molding and caput formation is simulated using the module

1. Select one of the two Difficult Labor Heads. They represent a flexed and deflexed head. Each comes with one section of parietal bone fixed onto the head.

2. The other two sections of parietal bone are moveable up or down to allow variation in the degree of molding.

3. There are three sizes of caput provided. Select one of the caputs and place on top of the parietal bones. (The larger the caput used the more difficult it will be to feel the fontanelles.)

Mild

Moderate

Marked
Attach the Skin for Difficult Labor over the top of the Difficult Labor Head by placing thumb in the centre of the skin and pulling around the head. The thumb holding the skin should also hold the caput in place.

The Difficult Labor Head is now ready to be fitted to the Rig (follow Rig Setup instructions to fit the head to the rig).
How membrane rupture is simulated using the module

1. Fit the Cervical Dilatation Pelvic Ring
2. Select the Static Rig

NOTE: Each of the heads has a small hole at the rear for the fluid tube to attach, and a hole on the top of the head where the water flows out when the membrane is in place.
3. Select the flexed or deflexed head. Peel away the membrane from the backing paper.

4. Place the membrane sheet centrally over the selected head.

5. Place the O ring on top of the membrane.

6. Roll the O ring down until it locates the groove along the edge of the head.
Fit the head to the Static Rig

Select a cervix

Stretch the cervix over the head and membrane

Rotate the head so that the hole on the underside of the Static Rig is easy to access

Fit the head to the Static Rig
11. Attach the fluid tube

12. Rotate the head back into the correct position with the arrow at the top and the tube at the bottom

13. Lubricate the outer surface of the cervix

14. Lubricate birth canal
Press the button on either side of the Statig Rig and with the presenting part facing down, fit the two gaps on the Statig Rig (next to the buttons) over the Cervical Dilatation Pelvic Ring.

The Static Rig is now in place.

Fill the supplied syringe with 60ml of warm water and attach it to the fluid tube.

Open the clamp on the tube. The water can now be injected into the model. Once all of the liquid has collected within the membrane, the membrane can be ruptured.
Setting up different scenarios - Latent Stage

1. SELECT THE STATIC RIG

2. Pick one of the PRESENTING PARTS

   - Flexed Head
   - Deflexed Head
   - Face
   - Brow
   - Breech

**AMNIOTIC MEMBRANE SET**

* To simulate membrane rupture, you’ll use one of the heads (Flexed or Deflexed)

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**OR any of the DIFFICULT LABOR HEADS**

- Flexed Head
- Deflexed Head
- Set of 3 Caputs
- Head Skin

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3. Select one of the CERVIXES (Latent Stage)

   - 0 cm dilatation
     - 0% effacement
   - 1 cm dil
     - 40% eff
   - 2 cm dil
     - 50% eff
   - 3 cm dil
     - 65% eff
   - 4 cm dil
     - 70% eff
   - 4 cm dil
     - 100% eff

* We recommend using 3 to 4 cm dilatation cervixes when training Difficult Labor Heads or Amniotic Membrane
Setting up different scenarios - Active Stage

1. SELECT THE DYNAMIC RIG

2. Pick one of the PRESENTING PARTS
   - □ Flexed Head
   - □ Deflexed Head
   * You’ll use one of the heads (Flexed or Deflexed)

OR any of the DIFFICULT LABOR HEADS
   - □ Flexed Head
   - □ Deflexed Head
   - □ Set of 3 Caputs
   - □ Head Skin
   (Mild, Moderate & Marked)

3. Use the DYNAMIC CERVIX (Active Stage)
   - □ It stretches from 4 to 10cm dilated
   - □ 10 cm dil Anterior lip
A good starting point...

Take a look at our Cervical Dilatation & Effacement video

Visit the website or YouTube channel

limbsandthings.com

youtube.com/limbsandthings