



Standard Operating Procedure (SOP)

Department:	Families & Therapies/ Obstetrics
SOP Ref No:	ABUHB/F&T/1327
SOP Title:	Standard Operating Procedure for Booking a Planned Caesarean Section.

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Approved by:	Clinical Effectiveness Forum (CEF)			02/03 /2026
Issued to:				

Effective Date:	02/03/2026
Review Date:	02/03/2029

Change / Amendment History

Version No	Effective Date	Brief Summary of Changes	Author
Version 1	02/03/2026	<ul style="list-style-type: none"> New document. 	Claire Hill Lisa Pilkington

Status: Issue 1 Issue date: Approved by: Review by date:

1 Introduction

Caesarean section rates have continued to rise across Wales in recent years, reflecting shifting demographics, increasing clinical complexity, and changes in maternity care patterns.

As caesarean birth activity grows, maternity services face increasing pressure on obstetric theatres, anaesthetic provision, midwifery and obstetric staffing, and postoperative care capacity.

This Standard Operating Procedure (SOP) has been developed to support a consistent, transparent, and equitable approach to the planning and scheduling of planned caesarean sections within our service. Its purpose is to ensure:

- Efficient and fair allocation of theatre resources,
- Equitable distribution of workload across clinical teams,
- Robust management of increasing clinical complexity,
- Timely coordination of multidisciplinary input where required, and
- Safe, high-quality care for all women and birthing people undergoing planned caesarean birth.

By standardising processes and clarifying roles and responsibilities, this SOP aims to improve operational flow, reduce avoidable delays, and optimise both patient experience and staff wellbeing in a context of rising demand.

This document uses the term woman, but recognises that not all people having babies within Aneurin Bevan University Health Board identify as women, and therefore applies to all people who are pregnant.

2 Scope

This SOP applies to the planning, scheduling, and coordination of all planned caesarean sections undertaken within the maternity service.

3 Roles & Responsibilities

Obstetricians

- Assess and confirm the clinical indication and timeframe for planned caesarean section.
- Identify complex cases or those requiring multidisciplinary input and initiate timely referrals, provide appropriate counselling on risks, benefits and alternatives.
- Ensure risks of procedure are discussed and documented.
- Complete the Elective C-Section Booking form via the Badgernet system accurately.
- Contact the scheduling team directly via the generic mailbox for cases as outlined in the SOP.
- Ensure adherence to this SOP and escalate any concerns through appropriate governance channels.

Scheduling Team:

- Daily monitoring of generic mailbox Abb.plannedCS@wales.nhs.uk.
- Facilitation of weekly scheduling meeting.
- Review, reorganisation and population of scheduling lists for planned caesarean section birth via the Badgernet system and pre-clerking appointments via the pre-clerking diary.

Ward Clerks (Labour Ward):

- Contacting women to advise of pre-clerking appointment and planned caesarean birth dates.
- Updating ORMIS with planned caesarean births as per scheduling list.

Labour Ward Co-Ordinators:

- Support the day-to-day running of the elective caesarean section list.
- Support with elective caesarean section allocation in the circumstances as outlined in the following SOP.
- Liaise directly with the scheduling team where required.

Senior Management Teams:

- Ensure maternity teams are aware of the following SOP.
- Monitor and review any incidents arising from the following SOP.
- Support resource allocation in the context of the following SOP.
- Review and update the following SOP as required.

5 Procedure

- Decision making for caesarean section should be documented on the woman's Patient Electronic Record (PER) via the Badgernet system. This documentation should include risks, outcomes, implications for future pregnancy and surgical risks.

- Caesarean section birth should be booked by completing the Badgernet 'Elective C-Section Booking' form. This can be located by searching for Elective C-Section Booking in 'Enter new note' (Figure 1).



Enter new note...

Pregnancy Summary

Notes During Pregnancy

GROW

Fetal Medicine

HDU

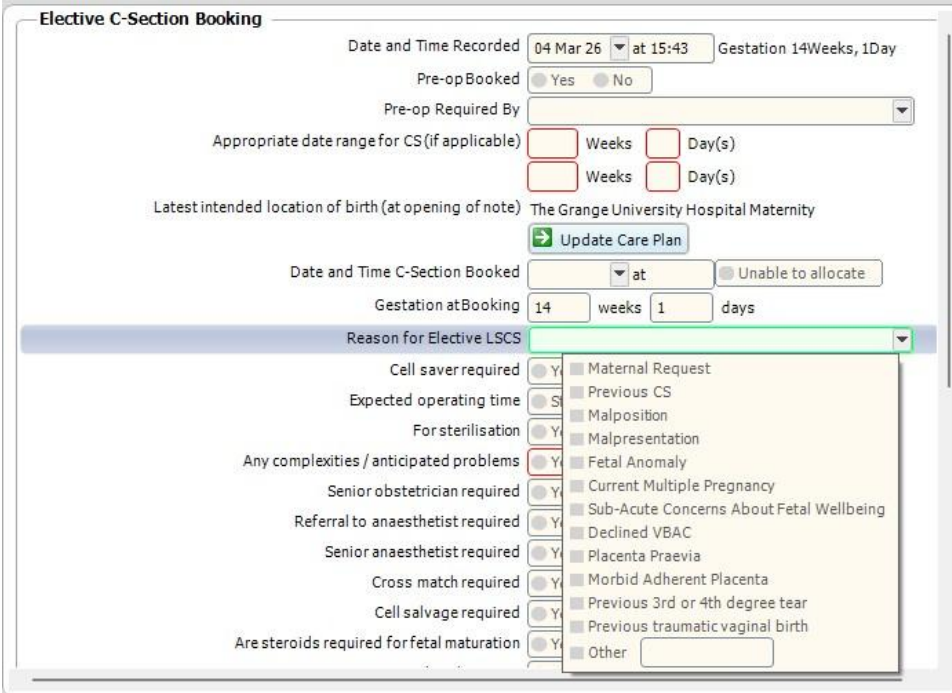
Search

Woman Notes

Elective C-Section Booking

Figure 1

- When completing the Elective C-Section Booking Form, please ensure the below information is completed in full:
 - Date and time recorded,
 - Appropriate date range for the birth by caesarean section. Please note, for most singleton pregnancies caesarean section birth should take place between 39- 40 weeks' gestation. If a different gestation is required, please ensure the reason for this is documented in the additional notes section.
 - The reason for the elective caesarean section should be selected via the drop-down box (Figure 2).



Elective C-Section Booking

Date and Time Recorded: 04 Mar 26 at 15:43 Gestation: 14Weeks, 1Day

Pre-op Booked: Yes No

Pre-op Required By: [Dropdown]

Appropriate date range for CS (if applicable): [] Weeks [] Day(s)
[] Weeks [] Day(s)

Latest intended location of birth (at opening of note): The Grange University Hospital Maternity

[Update Care Plan]

Date and Time C-Section Booked: [] at [] Unable to allocate

Gestation at Booking: 14 weeks 1 days

Reason for Elective LSCS: [Dropdown]

Cell saver required: Y N

Expected operating time: S N

For sterilisation: Y N

Any complexities / anticipated problems: Y N

Senior obstetrician required: Y N

Referral to anaesthetist required: Y N

Senior anaesthetist required: Y N

Cross match required: Y N

Cell salvage required: Y N

Are steroids required for fetal maturation: Y N

Reasons for Elective LSCS (from dropdown):

- Maternal Request
- Previous CS
- Malposition
- Malpresentation
- Fetal Anomaly
- Current Multiple Pregnancy
- Sub-Acute Concerns About Fetal Wellbeing
- Declined VBAC
- Placenta Praevia
- Morbid Adherent Placenta
- Previous 3rd or 4th degree tear
- Previous traumatic vaginal birth
- Other: []

Figure 2

- If the woman is requesting sterilisation, please ensure the '*For sterilisation*' tick box is selected.
- If the woman has been referred to the Obstetric Anaesthetic Team antenatally, please ensure '*Referral to anaesthetist*' tick box is selected.
- Please ensure the relevant tick box is selected if the woman requires admission the night before her elective caesarean section, such as in the event of a diabetic woman requiring variable rate insulin intravenous infusion (VRIII).
- All risk factors (including diabetes) are to be documented on the Elective C-Section Booking form under additional notes.
- Please also include the RAG (red, amber, green) scoring (Appendix 1) in the additional notes box.
- Women are to be informed that a ward clerk will contact them 10- 14 days prior to the week of their birth, with a date for caesarean section



and pre-clerking time. The date of the caesarean section will be added to the woman's Badgernet record.

- Where specific dates for caesarean birth are required- such as cases involving placenta accreta/ percreta or where input from another surgical specialty is needed- please complete the C-Section Booking form and email it to the generic mailbox Abb.plannedCS@wales.nhs.uk, ensuring that you include the specific case requirements and the requested procedure date. These cases will then be reviewed at the next scheduling meeting. Please note that it is the responsibility of the named Consultant Obstetrician to ensure that all necessary arrangements (interventional radiology, other surgical speciality input) are in place for these cases.
- Scheduling meetings will occur on a weekly basis on Thursday afternoons. During these meetings, the schedule for the following week will be reviewed and the theatre schedule for two weeks ahead will be planned and populated onto the *Booked elective C-Sections* Badgernet list. Pre-clerking appointments will be populated into the pre-clerking diary kept on Labour Ward.
- In the event of the need for a caesarean section that does not fulfil the category 3 classification (National Institute for Health and Care Excellence, 2021) at short notice (within 2-weeks), please email the generic mailbox Abb.plannedCS@wales.nhs.uk. This mailbox will be monitored on a daily basis, and the scheduling team will find an appropriate date.
- In the event of the need for a caesarean section that fulfils the category 3 classification (National Institute for Health and Care Excellence, 2021) or a caesarean section that is required within 1-week, please

contact the Labour Ward and discuss this with Labour Ward Co-ordinator (1).

- There will continue to be a live scheduling list on the Badgernet system. Under no circumstance are additional planned caesarean sections to be booked onto this list without prior discussion with the scheduling team or Labour Ward, as these women will not receive appropriate preclerking nor will they be allocated a date for their planned caesarean section.

6 References

National Institute for Health and Care Excellence (2021). *Caesarean birth* [Online]. Available at: <https://www.nice.org.uk/guidance/qs32/resources/caesarean-birth-pdf-2098602884293> (Accessed 04/03/2026).



GIG
CYMRU
NHS
WALES

Bwrdd Iechyd Prifysgol
Aneurin Bevan
University Health Board

7 Appendix (if applicable)

Appendix 1: Planned C-Section Risk RAG Score

Maternal Request	Patient Score 1
Previous Traumatic Delivery	
Breech	
Gestational Diabetes Type 1 / Type 2	
Previous 3 rd or 4 th Degree Tear	
Prematurity 34 > 37 Weeks	
Maternal Red Cell Anti Bodies Requiring X-Matched Bloods	
BMI > 35 – 40	Patient Score 2
Prematurity 28 > 36+6 Weeks	
Small or Clinically Significant Fibroids	
X1 Previous Caesarean Section	
Unstable / Transverse Lie	
	Patient Score 3
Multiple Pregnancy	
Tubal Ligation / Salpingectomy	
X2 Previous Caesarean Sections	
Prematurity Under 28 Weeks	
Previous Midline Laparotomy	Patient Score 4
Additional procedures excluding tubal ligation	
Placenta Praevia	
High Risk of Abdominal Adhesions	
BMI > 40 –50	
X3 Previous Caesarean Sections	
Patient Declining Blood Products / Cell Savage	
Spinal Injury Patient	
BMI > 50	Patient Score 5
X4 Previous Caesarean Sections	

Status: Issue 1 Issue date: Approved by: Review by date:
Owner:

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Placenta Accreta

Patient Score 6

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