

Rubin I & II Maneuvers

Definition

- Rubin I (suprapubic pressure): attempts to dislodge the anterior shoulder from behind the pubic symphysis
- Rubin II: manual anterior rotation of fetal shoulder to decrease shoulder diameter

Indications

- Shoulder dystocia
 - “Turtle sign” = retraction of the fetal head against the maternal perineum
 - Difficulty or failure to accomplish external rotation of the head after it has passed the perineum
 - Resistance to the delivery of the anterior shoulder with the usual amount of traction applied to the fetal head

Risk factors associated with shoulder dystocia

- Abnormal pelvic anatomy
- Excessive weight gain
- Fetal macrosomia (suspected)
- Gestational/pre-gestational diabetes
- Multiparity
- Obesity (>200 lbs.)
- Operative vaginal delivery
- Post-term gestation
- Precipitous delivery
- Previous history of shoulder dystocia
- Previous large infant (> 4000 grams)
- Prolonged second state of labor
- Protracted active phase of labor
- Short stature (< 5” tall)

Technique (Rubin I):

1. Have an assistant at the mothers side place their hands on the suprapubic region of the mothers abdomen
 - a. Position is similar to that of CPR with assistant above the woman
 - May need a step stool to attain correct position
 - b. Mother should be lying on back with legs hyperflexed and knees to chest (McRobert’s position)
2. With the heel of the hand (or fist) and arms straight, apply moderate pressure obliquely (downward and laterally) to fetal anterior shoulder
3. If continuous pressure does not dislodge the shoulder use a rocking motion (compression/relaxation)

Technique (Rubin II):

1. Place fingers/hand on the most easily accessible fetal shoulder
 - a. May require episiotomy
2. Push the shoulder toward the anterior surface of the fetal chest

- a. May result in abduction of both fetal shoulders and decrease the shoulder to shoulder dimension, freeing the impacted anterior shoulder

Notes

- Do not perform fundal pressure or encourage continued maternal pushing

References

1. Baxley EG, Gobbo RW. Shoulder dystocia. Am Fam Physician. 2004;69(7):1707-14.
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4. Sokol RJ, Blackwell SC, for the American College of Obstetricians and Gynecologists. Committee on Practice Bulletins–Gynecology. ACOG practice bulletin no. 40: shoulder dystocia. 2002. (Replaces practice pattern number 7, October 1997). Int J Gynaecol Obstet. 2003;80:87-92.