OSCE checklist for partograph

An OSCE checklist for the partograph covers recording the patient details, then plotting cervical dilatation, fetal heart rate, contractions, maternal observations and medicines against time, and acting when a line is crossed.

OSCE checklist for partograph: steps to practise

1. Confirm that the woman is in the active phase of labour as your chart defines it, and that she has agreed to each examination.
2. Fill in the heading: name, hospital number, gravida and para, date and time of admission, time of membrane rupture and the time active labour started.
3. Listen to the fetal heart at the intervals your policy says, feel the mother's pulse at the same time to tell them apart, plot the rate and mark any value outside the normal range.
4. Record the state of the membranes and the colour of the liquor, such as clear, meconium-stained or blood-stained, using the letters your chart gives.
5. Record moulding of the fetal head if present.
6. Plot cervical dilatation from the vaginal examination with an X, and plot descent of the head as fifths palpable above the pelvis on abdominal palpation with an O.
7. Compare each dilatation plot with the alert and action lines printed or drawn as your chart instructs.
8. Record contractions: how many in ten minutes, and shade each box with the pattern your chart key gives for how long each contraction lasts.
9. Record maternal pulse, blood pressure, temperature and urine (amount and test results), and any oxytocin, medicines or IV fluids with the time.
10. Act at once if a plot reaches the alert or action line, the fetal heart is abnormal, the liquor is meconium-stained or a maternal observation is abnormal: tell the senior midwife or obstetrician and record the plan.

What candidates commonly forget

- Starting the plot before the active phase

- Not marking the time of each entry
- Not feeling the mother's pulse while listening to the fetal heart
- Shading contractions for strength instead of length
- Forgetting liquor and moulding
- Not acting when a line is crossed

Local policy comes first

This is our own practice checklist. Your college, hospital or country may do some steps differently. Where local policy and this list disagree, follow local policy. Your course may use the WHO modified partograph or the WHO Labour Care Guide, so use the form your teachers give you.

Practise the hands-on steps with a classmate or in a skills lab, because an AI patient cannot watch your technique. You can practise the talking part with an AI patient, and try one station free with no sign-up. Next, try Midwifery: Care in established labour on a midwifery unit. Back to the OBG nursing OSCE page: OBG nursing OSCE, or see the full OSCE checklist list.

Common questions

What is the OSCE checklist for the partograph?

Fill in the heading, then plot fetal heart rate, liquor, moulding, dilatation, descent, contractions, maternal observations, urine and medicines against time, and escalate any plot that reaches a line or any abnormal finding.

Is the partograph still used?

Many courses and hospitals still teach it. WHO now recommends its Labour Care Guide, so check which one your course uses.

What does the shading in the contraction boxes show?

It shows how long each contraction lasts, not how strong it is. Use the key printed on your own chart.

What does the alert line mean?

It shows that progress is slower than expected and needs review by a senior. Use the lines shown on your own chart.

Sources

- WHO labour care guide
- NICE NG235: intrapartum care

Checked 2026-11-13. Fees and rules change, so confirm them with the regulator before you book.