

Table 1. Anesthetic indications for general anesthesia in urgent or emergent cesarean delivery

Limited time due to maternal/fetal compromise	54
<i>Non-reassuring fetal heart rate:</i>	39
Sudden onset bradycardia/recurrent decelerations (n=31)	
Immediately following labour epidural placement (n=3)	
During fetal intrauterine transfusion (n=3)	
During attempted external cephalic version (n=2)	
<i>Cord/fetal prolapse</i>	13
<i>Placental abruption</i>	2
Maternal contraindication to neuraxial anesthesia	24
<i>Pregnancy-related contraindication:</i>	19
Thrombocytopenia (n=9)	
Anticoagulation given as in-patient (n=5)	
Obstetrical hemorrhage (n=4)	
Sepsis (n=1)	
<i>Pre-pregnancy related contraindication:</i>	5
Immune thrombocytopenic purpura (n=1)	
Von Willebrand disease (n=1)	
Hereditary dysfibrinogenemia (n=1)	
Dilated cardiomyopathy/pulmonary hypertension/CHF (n=1)	
Previous spine surgery and SCS in situ (n=1)	
Inadequate neuraxial anesthesia	17
<i>Failure of in-situ epidural top-up:</i>	14
Effective labour epidural with no top-ups in labour (n=6)	
CD within 1 hour of epidural placement (n=3)	
Epidural requiring ≥ 3 top-ups during labour (n=2)	
Parturient with 3 resited epidurals (n=1)	
Morbidly obese parturient (BMI 51) (n=1)	
5/10 pain score documented 30 mins prior to CD (n=1)	
<i>Failure of neuraxial anesthesia initiated in the OR:</i>	3
Attempted spinal insertion unsuccessful (n=1)	
Inadequate block noted after skin/fascia opened (n=1)	
Excess muscle tension interfering with surgical closure (n=1)	
Need for intraoperative conversion to GA:	2
<i>Invasive Placenta</i>	2

CD = cesarean delivery; CHF = congestive heart failure; SCS = spinal cord stimulator; BMI = body mass index