

## **Tips & Guides**

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## How to Choose an Obstetrician in Singapore: The Questions You Need to Ask!

## By Sassy Mama Singapore

Choosing the right obstetrician isn't a decision to be rushed. We know it's not an easy task, so we've compiled a list of questions that you need to ask as a soon-to-be mama!

The Singapore health system differs in some ways from the UK, the US, Australia and Europe. As with most decisions, objective, reliable information from diverse sources is crucial before making a properly informed choice. Keep working at it until you feel completely comfortable and before making a final decision, make sure you gather the following information:

- Most obstetricians will audit both their outcomes and their intervention rates and should, if asked, be able to provide their data to patients.
- For this kind of data to be meaningful, it should be large enough (a minimum of 1000 deliveries) this reduces the chance of good or bad outcomes being related to chance, or a run of high-risk patients skewing the data. The data should be continuous and recent; that is data for 2018 should be available by March 2019. Some obstetricians may allow their midwives or nurses to provide prospective patients with their statistics, particularly if the patient is trying to achieve a particular type of delivery, like a vaginal delivery of twins, or VBAC. If you have a very clear idea about how you want to give birth, tell your obstetrician. Ask the difficult questions, and if you feel shy about asking them, take a friend, husband or someone medically qualified to ask them for you. If you are keen to have a normal, vaginal delivery, you will have the best chance with an obstetrician who has a lower C-Section rate less than 40% if possible. Also ask about their emergency C-section rates these should ideally be less than 15%.
- Normal deliveries are unpredictable and can occur at any time of the day or night. Unlike the UK, the US, Australia or Europe, some hospitals in Singapore do not have 24-hour resident paediatricians on site. Check how far away your obstetrician will allow his or her paediatrician to be when you are in labour, so that you are assured that there will be someone to look after your baby should an emergency delivery be required.
- Ask your obstetrician whom they use as an anaesthetist. An obstetrician who is meticulous about their work will normally work closely with one particular anaesthetist who is experienced in obstetric anaesthesia and has

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- Look at the whole team an obstetrician needs support staff to achieve good outcomes and low intervention rates (the holy grail of good obstetric practice). Midwives, nurses and receptionists all play their part in ensuring great care. If you are planning on having a doula, make sure the doctor is amenable to this (many are not), and that the doula has admission privileges at the doctor's hospital.
- Ask friends, acquaintances and parenting Facebook groups; try to speak to at least 10 patients who have been delivered by any obstetrician you are seriously considering. Check outcomes did they get the delivery they wanted? Did they recover well? Did their stitches heal? Was their baby born in good condition?
- You should get clear (preferably written) instructions about what to do in an emergency; how to contact the hospital, the obstetrician and what to do if they are unavailable. No one can be available 24/7, 365 days a year. It is easier if the obstetrician is in a partnership, shares the same vision and has a similar track record in regards to safety and intervention. If they're not in a partnership, find out who their typical backup partner is in case they're out of town (this happens more than you'd think!).
- Check that your obstetrician delivers at a hospital you are happy with. Click here to see a detailed breakdown of delivery statistics and average costs at Singapore's private and public hospitals!
- If you are rhesus negative, check the hospital has rhesus negative blood continually available in its own blood bank. Rhesus negative blood is rare in ethnic Chinese people – less than 0.5% – but relatively common in Caucasians, at around 15%. Some hospitals may not keep rhesus negative blood on site for emergencies and it can take time to get it to the hospital.
- Fees should be transparent with no hidden charges. Does your insurance policy cover the fees?

Good luck, mama!

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