



You will be given information about the chance of your ECV being a success. If ECV is successful but your baby turns back into the breech position, or if ECV is unsuccessful and your baby does not want to turn, it may be possible to have a second attempt on another day. If your baby does not turn after a second attempt, your obstetrician will discuss your options for birth.

ECV is safe and does not cause labour to begin. Your baby's heart rate will be monitored before and after the ECV. Like any medical procedure, complications can sometimes occur. To minimise these risks, an ECV should be carried out in a place where the baby can be delivered by emergency caesarean section, if necessary. About one in 200 (0.5%) babies will need to be delivered by emergency caesarean section immediately after an ECV because of bleeding from the placenta or changes in the baby's heartbeat.

ECV is not suitable for everyone and should not be carried out if:

- you need a caesarean section for other reasons
- you have had vaginal bleeding during the previous seven days
- the baby's heart rate tracing (also known as a CTG) is not normal
- your uterus is not the normal (pear) shape
- your waters have broken before you go into labour
- you are expecting twins or more (except delivery of the last baby)

If you have had a previous caesarean section, ECV