



Pre-labour rupture of membranes (PROM) after 37 weeks

Information for women, birthing people, and their families

Sometimes the waters around the baby (amniotic fluid or liquor) break before labour starts. This is known as pre-labour rupture of membranes (or PROM). When this happens:

- about 6 in 10 women will go into labour naturally within 24 hours; and
- most will go into labour within 48 hours.

Why has my midwife suggested I come into hospital?

If your waters break but you are not in labour, you may be invited into the hospital for assessment.

Your midwife will record your pulse and temperature, and listen to your baby's heartbeat. Your midwife may also suggest continuous fetal monitoring. This usually takes approximately 20 minutes, but sometimes it needs to continue for longer. For more information, please read **Monitoring your baby's heartbeat in labour**. (<https://leaflets.ekhuft.nhs.uk/monitoring-your-baby-s-heart-beat-in-labour/html/>)

Why do you need to confirm my waters have broken?

It is not always obvious if your waters have broken. PROM is confirmed if:

- liquor is clearly seen draining from the vagina; and / or
- you have a soaked pad, that smells of liquor.

If it is not obvious that your waters have broken, your midwife or doctor may suggest using a sterile speculum examination. A speculum is a plastic instrument, which allows the midwife or doctor to see inside your vagina. It is the same instrument we use for a smear test. The examination will help to confirm if your waters have broken. If it is very obvious that they have broken, you do not need this examination.

The midwife or doctor may also offer to take swabs to check for infection. If needed, they will discuss this with you.

What if I am sure my waters have broken, but the midwife cannot see any fluid?

If there is any doubt and liquor cannot be seen during the speculum examination, we may offer you one of the following.

- **A bedside ultrasound scan**

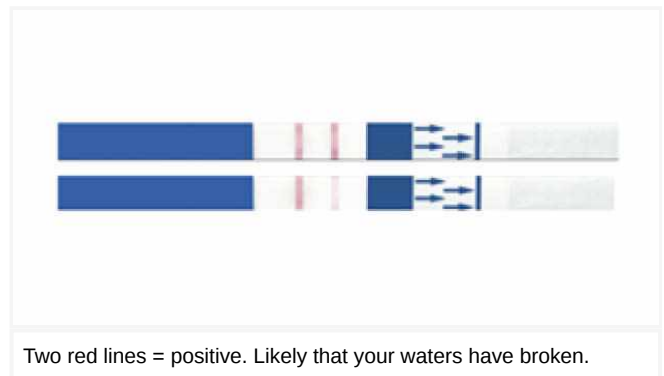
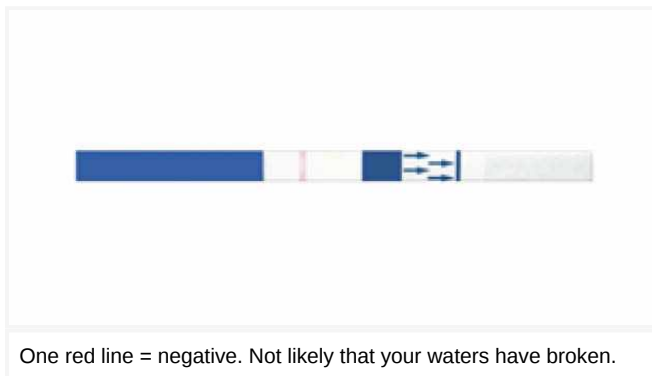
A bedside ultrasound scan is performed at your bedside by a doctor. The doctor looks at the amount of fluid around your baby. If no liquor is seen around your baby, on ultrasound PROM is likely. You do not need an Amnisure test in this case.

- **Amnisure test**

If there is doubt whether any liquor can be seen in your vagina, we will offer you an Amnisure test.

- An Amnisure test is performed during the speculum examination.
- A special swab collects a sample of any discharge in your vagina.
- The speculum is then removed.
- The swab is placed in special fluid and rinsed in solvent for 1 minute, and removed.
- A test strip is placed in the special test fluid.

This test is read in a similar way to a pregnancy test.



What are the risks of developing an infection after my waters have broken?

If your waters have broken, do not have sex. Having sex will increase the risk of you and / or your baby getting an infection.

The risk of infection increases:

- the longer the time between breaking the waters and the start of labour; and
- by the number of internal vaginal examinations carried out.

If you are not in labour, we recommend that vaginal examinations are avoided.

Will I need to be induced?

If your waters have broken, we will offer you the choice between:

- expectant management (wait and see) for up to 24 hours; or
- induction of labour, as soon as possible.

If you chose to wait for labour to begin naturally, your midwife will arrange a day and time for your labour to be started. This will be approximately 24 hours after your waters first broke. Contact Maternity Triage if you have any concerns at any time. Their phone number is at the bottom of this leaflet.

We will advise you to have induction of labour as soon as possible when your waters break, if:

- you are Group B Streptococcus positive; or
- there are any concerns with you or your baby.

What should I do while I am waiting for my labour to start?

- Get plenty of rest.
- Eat and drink normally.
- While you are awake, check your temperature every 4 hours.
- Do not have sex, this will increase the risk of you getting an infection in your womb.
- Wear a sanitary pad and change it regularly. Do not wear a tampon, as this increases the risk of infection.
- You can have a bath or shower as usual; this will not increase the risk of infection.
- You may have a 'show', while you are waiting for your labour to start. A 'show' is a lump or strands of mucous that is sometimes streaked with blood. This is normal, and a sign of your labour starting.
- You may have mild period-like pains or tightening of your tummy. These are not yet labour contractions, but your body preparing for labour.
- The pains will become more regular and much stronger when your labour starts. If you start to get mild pains, you can take 2 x 500mg paracetamol tablets every 6 hours.

When should I call for advice?

Please contact Maternity Triage immediately if you experience any of the following.

- The colour of the loss on your sanitary pad (the water (liquor)) is no longer clear, or it is smelly.
- You feel unwell or feverish, with a temperature of 38°C or higher.
- Your baby is moving less than normal.
- Regular contractions begin or you have abdominal pains.
- You need pain relief.

- You have any worries or concerns.

What if I chose not to be induced or I want to wait longer?

As with all aspects of your care, you always have the right to say no. Carefully consider and discuss your worries with your midwife or doctor. Your midwife or doctor will discuss any additional concerns or risks with you. You can also discuss the option of a caesarean birth, if this is what you want.

What is prolonged rupture of membranes?

Prolonged rupture of membranes means that your waters have been broken for more than 24 hours. If you have not gone into labour naturally after 24 hours, we recommend induction of labour.

Induction of labour is where we try to artificially start your labour. Ideally, so that your baby is born within 48 hours of your waters breaking. This is to reduce the risk of infection to you and your baby.

What risks are involved?

- **The risks of inducing your labour immediately**
 - Your cervix may not be ready to dilate and needs to have time to prepare.
 - Trying to force this process too soon, can lead to a longer labour.
 - Your baby may become distressed.
 - There is an increased chance you will need an assisted birth. For example:
 - forceps
 - ventouse (suction cup), or
 - caesarean birth.
- **The risk of leaving your waters broken for too long**

This increases the risk of you and / or your baby getting an infection. **Call Maternity Triage immediately, if you are at home and have any of the following.**

- Feel unwell.
- Feel shivery (hot and cold).
- Have a fever (a temperature of 38°C or higher).
- You are worried about your baby's movements.
- There is a change in the colour of the waters leaking.

Maternity Triage will invite you to be seen at the hospital. Their number is at the bottom of this leaflet.

The risk of your baby developing an infection is about 1 in 100. Where the waters have not broken, the risk of infection is 1 in 200 babies.

Why have I been advised to take antibiotics?

If your waters have broken for more than 24 hours, it is East Kent Hospitals' policy to recommend patients take antibiotics in labour.

We give antibiotics through a cannula, via an intravenous (IV) drip. A cannula is a small plastic tube in your arm or the back of your hand. If you have worries or concerns about needles, please speak with your midwife. They will be able to support you with this.

What happens if I did not have IV antibiotics before my baby was born?

- We will offer your baby IV antibiotics through a cannula. The cannula is often placed in baby's hand, but we can place them on different parts of baby's body.
- Your baby may need to have blood tests to check for infection.
- We will ask you to stay in hospital, so we can observe your baby for 24 hours after birth. We will observe their:
 - heart rate;
 - respiration rate (how fast they are breathing);
 - temperature; and
 - observe their general wellbeing (how they look and behave).

Where can I give birth?

If your waters have broken for more than 24 hours, it is our policy to recommend delivery on the labour ward. This is due to the increased risk of infection for you and your baby.

Who can I contact if I have concerns?

Contact Maternity Triage for help and advice.

- **Maternity Triage**
Telephone: 01227 206737
Open: Monday to Sunday, 24 hours a day.

Useful links

- East Kent Hospitals. Monitoring your baby's heart beat in labour. Patient leaflet. (<https://leaflets.ekhuft.nhs.uk/monitoring-your-baby-s-heart-beat-in-labour/html/>)

- NHS. 3 questions for better health. Easy read. (<https://library.nhs.uk/wp-content/uploads/sites/4/2023/11/3-Qs-Leaflet-2-3-questions-for-better-health-2022-FINAL.pdf>)
- National Institute for Health and Care Excellence (NICE). Intrapartum care. NG235. Published 29 September 2023; Last updated 14 November 2025. (<https://www.nice.org.uk/guidance/ng235>)
- National Institute for Health and Care Excellence (NICE). Inducing labour. NG207. Published 04 November 2021. (<https://www.nice.org.uk/guidance/ng207>)

[Web sites last accessed 4 December 2025]

Ask 3 Questions

There may be choices to make about your healthcare. Before making any decisions, make sure you get the answers to these three questions:

- What are my choices?
- What is good and bad about each choice?
- How do I get support to help me make a decision that is right for me?

Your healthcare team needs you to tell them what is important to you. It's all about shared decision making.

What do you think of this leaflet?

We welcome feedback, whether positive or negative, as it helps us to improve our care and services.

If you would like to give us feedback about this leaflet, please fill in our short online survey. Either scan the QR code below, or use the web link. We do not record your personal information, unless you provide contact details and would like to talk to us some more.

Giving feedback about this leaflet



<https://www.smartsurvey.co.uk/s/MDOBU4/>

If you would rather talk to someone instead of filling in a survey, please call the Patient Voice Team.

- **Patient Voice Team**
Telephone: 01227 868605
Email (ekhuft.patientvoice@nhs.net)

This leaflet has been produced with and for patients.

Please let us know:

- If you have any accessibility needs; this includes needing a hearing loop or wanting someone to come with you to your appointment.
- If you need an interpreter.
- If you need this information in another format (such as Braille, audio, large print or Easy Read).

You can let us know this by:

- Visiting the Trust web site (<https://www.ekhuft.nhs.uk/ais>).
- Calling the number at the top of your appointment letter.
- Adding this information to the Patient Portal (<https://pp.ekhuft.nhs.uk/login>).
- Telling a member of staff at your next appointment.

Any complaints, comments, concerns or compliments, please speak to a member of your healthcare team. Or contact the Patient Advice and Liaison Service on 01227 783145 or email (ekh-tr.pals@nhs.net).

Patients should not bring large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property has been handed into Trust staff for safe-keeping.

Further patient information leaflets are available via the East Kent Hospitals' web site (<https://www.ekhuft.nhs.uk/patient-information>).

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