

TENS USAGE CONSENT

City	
State	Zip
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Date

What is TENS?

TENS stands for Transcutaneous Electrical Nerve Stimulation. By using a handheld batteryoperated device, mild electrical impulses are transmitted through the skin to stimulate nerve fibers. TENS is a safe, non-pharmacological method of pain control in labor and especially of back pain.

Does TENS work?

Research findings on TENS have shown that laboring women using the device use less pain medication than women using a "sham" TENS device [2]. The majority of women surveyed in the UK National Birthday Trust Survey rated it as moderately or very helpful in relieving pain and would use it again in a future labor [3]. A study that investigated the use of TENS for back pain in labor found that "TENS has a specific beneficial effect on pain localized in the back."[1].

What are the contraindications for TENS?

The TENS unit may not be used in combination with a shower or a bath and the self-adhesive pads should be applied to dry skin. Studies show that the TENS unit is contraindicated for patients with demand cycle pace-makers and with seizure disorders but that it does not have any other known risks or side effects [4]. The TENS unit has been used with EFM and does not interfere with the EFM machine. It may sometimes affect an internal fetal monitor.

How is the TENS unit used?

- Clean and dry the skin in the area to be stimulated.
- Assemble the TENS unit according to the instructions that come with the unit.
- Apply the stimulating pads (re-usable ones are best) to the back in designated areas.
- Turn the output control to ON.
- Adjust the output control slowly until a mild tingling sensation is felt and adjust to a comfortable level.
- Press the boost button to alternate between Pulse and Continuous Modes.
- Pulse mode may be used between contractions and Continuous mode during contractions.
- Turn the TENS OFF before removing the stimulating pads.

References

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- [4] Ericksson M, Schuller H, Sjolund B 1978 Hazard from transcutaneous nerve stimulators in patients with pacemakers. Lancet 1: 1319

Further Reading

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