**Appendix 2.** Hierarchya for determining primary indication for induction.

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| **Tier I**Placental abruptionChorioamnionitisbFetal indicationscRupture of membranes | **Tier II**Hypertensive disorderdDiabetes mellitusCholestasis Advanced maternal ageStillbirth (current)Acute psychiatric illness  | **Tier III**Late-termStillbirth (prior)Social reasons  |

a If more than one indication is within the same tier, choose in descending order (highest listed=primary)

b Caution with chorioamnionitis as this is rarely an indication for induction at term but more commonly develops during induction

c Includes intrauterine growth restriction, oligohydramnios, anomalies, non-reassuring antenatal testing, other

d Includes chronic hypertension, gestational hypertension, preeclampsia, eclampsia, HELLP (hemolysis, elevated liver enzymes, low platelets) syndrome