

Birth Plan

Name: _____

Partner's Name: _____

Due Date: _____

Partner's Contact: _____

Midwife: _____

Planned Delivery Location:

Doula: _____

Other Support People:

Doctor: _____

My delivery is planned as: Vaginal C-section VBAC
 Water Birth

PLEASE NOTE:

I am GBS positive I have gestational diabetes I'm delivering multiples _____

Allergies: _____ Other: _____

Other Important Information:

Name: _____

Due Date: _____

Labor Induction/Augmentation

I prefer to attempt all natural methods first. Like: walking, nipple stimulation, intercourse, and herbs.

If needed, I prefer: Membrane Sweeping Membrane Rupture Pitocin

I Do Not Want to be induced, unless medically necessary.

Other notes: _____

Fetal Monitoring

I would like:

- Continuous Intermittent Internal External Doppler only
 Performed only if baby is in distress

Other notes: _____

During Labor

I would like:

- Music (I will provide) Relaxing Atmosphere As few interruptions as possible
 To Wear my own clothes Record labor and birth Take photos of labor and birth
 To walk around freely To labor in water Free to eat/drink
 My Partner to be present the entire time To limit hospital staff (no students or interns)

Other notes: _____

Pain Relief

I would like to use:

- Acupressure Breathing Epidural Hypnosis Massage
 Meditation Narcotics Sedatives Walking Nothing
 Please make suggestions for pain relief Please do not make suggestions for pain relief

Other notes: _____

Name: _____

Due Date: _____

Delivery

I would like:

- To kneel/squat
- Use a birthing stool
- No loud coaching
- No interventions unless its a medical emergency
- Stand
- Lie on my side
- Use a birthing tub
- Have help for leg support
- Be on hands and knees
- Perineal Support
- Spontaneous Pushing

As the baby arrives I would like to:

- Touch the head as it crowns
- Help catch the baby
- Avoid Vacuum extraction
- Avoid episiotomy unless its a medical emergency
- Use a mirrior to see baby
- Let my partner catch baby
- Use methods suggested by midwife/doctor at the time
- Avoid Using Forceps

If cesarean, I would Like:

- My partner present
- Screen lowered to see baby
- Immediate contact with baby

Other notes: _____

After Delivery

I would like:

- Immediate Skin to Skin
- My partner to cut the cord
- If Baby and I need to be separeted allow my partner to hold skin to skin
- Delayed Cord Clamping
- Gently Breastfeed with limited help

I would like my baby's medical exam

- Given in my presence
- Given after we've bonded

Please do NOT give my baby: Sugar Water Formula A Pacifier

Other notes: _____

If a boy, I plan to: Circumcise Not Circumcise