

BIRTH PLAN

The purpose of this birth plan is to express our hopes for the birth of our child. We understand that this is written with the hopes that labor and delivery will progress naturally, but we also realize that this is not always the case. We understand that labor and delivery are not planned processes; changes may need to be made as labor progresses. We would like to be informed of our alternatives if problems arise. Thank you for your help in working toward our mutual goal of the safe and healthy delivery of someone so very special to us.

Mother's name _____ Baby's doctor _____
 Father's name _____ Circumcision Yes No More Information
 Doula/support person _____ Baby's feeding plans _____
 Due date _____
 Mother's doctor/midwife _____

Special circumstances of my pregnancy include:

Twins Preeclampsia/high blood pressure Other _____
 Prior caesarean delivery Gestational diabetes _____
 Pre-term labor Heart disease _____

During labor, if my condition allows, I would be interested in:

Having ice chips Being up and/or walking Other _____
 Using the shower/tub/whirlpool Changing position frequently _____
 Listening to music Having intermittent fetal monitoring _____
 Having medication Having epidural _____

During the birth of my baby, I have the following requests:

To initiate breastfeeding within the first hour after birth To use a mirror while pushing
 To have my children (*must be accompanied by another adult*) present during labor
 To have my children in the room soon after the baby is born
 To have my support person help the nurse give my baby its first bath
 To have immediate skin to skin contact with my baby

During my hospital stay, I have the following requests:

Internet baby photo services Other _____
 To feed on demand (7-12 times in 24 hours) _____
 To have footprints in my baby's book _____

The following things are also important to us:

The following is a list of birth plan options and medical interventions for you to consider:

Clothes

Own clothing
Hospital gown

Empty Bladder

Walk to toilet
Bedpan
Catheterization, if necessary

Monitoring

Intermittent
Continuous
External/internal

Relaxation Techniques

Breathing
Focal point
Relaxation
Imagery/visualization
Close eyes
Music (bring your own)
Vocalization, moaning, chanting
Aromatherapy

Hydration

Drinking fluids
Popsicle
Ice chips
Sour sucker
Mouth wash
Heparin lock
IV fluids (epidural)
No liquids
Dry diet (crackers & pretzels)

Comfort measures

Dim lights
Music
Heating pad
Hot/cold packs
Shower/massage
Warm tub bath
Whirlpool

Comfort items

Pillows
Tennis balls
Rolling pin
Massager
Lotion
Massage oils

Pain Medication

Definite
Offer please
Only if I ask

Positions

Walking
Side-lying
Sitting in chair
Rocking chair
Standing
Pelvic rock
Dangle
Back-to-back with partner
Hands & knees
Squat
Birth ball
Lunge side to side
Slow dance

Assist Labor

Position change
Break amniotic sac
Pitocin, IV
Directed pushes
Episiotomy
Forceps/vacuum extractor

Pushing

Directed/breath holding
Undirected/spontaneous
Use of mirror

Perineal Care

Massage oil
Warm compresses
Episiotomy
Prefer tear to episiotomy

Cutting cord

Father
Mother
Doctor/midwife

Baby's Warmth

On mother's chest
To warmer only if medically indicated

Cesarean

Father present
Remain awake
Describe events of birth to me

Welcoming Baby

Footprints
Baby book
Time alone as family
Music or singing
Religious/cultural ceremony
Internet baby photo
Have other children present at delivery or after delivery

Mother/Baby Care

Father rooming in
Sibling visitation