

What is my birth plan?

Your preferences for labor, childbirth and immediately after

We invite you to share your preferences for childbirth. They help your birth team support you and your family according to your wishes. These preferences are flexible. We realize your thoughts and feelings may change throughout the labor and birthing process – we will work with you throughout your childbirth. We want to help you have a satisfying experience while keeping both you and your baby healthy and safe.

Support during labor and birth

During labor, I would like to have present:

- My partner
- Birth doula
- Visitors, depending on how I feel at the time
- The following support people: _____
- Personal request: _____

During my baby's birth, I would like to have present:

- My partner
- Birth doula
- The following support people: _____
- Personal request: _____

Pain control during labor and birth

I have discussed pain control options with my physician/certified nurse midwife and wish:

- To have an unmedicated birth
 - In support of the unmedicated birth option, periodically remind me of coping techniques, such as breathing, relaxation, position changes, birth ball, rocking chair, massage and hydrotherapy
- To have medication as needed for pain relief
- To have an epidural
- To use nitrous oxide as needed for pain relief
- Personal request: _____

My health care team understands that I reserve the right to change my mind regarding pain relief.

Labor

If medically safe for me and my baby, I would like:

- To walk around
- To use the birthing ball and/or rocking chair
- To use the tub/shower
- To listen to music of my choice (brought from home)
- Personal request: _____
- To have the lights dimmed
- To have ice chips/sips of water
- To have ice pops or other clear liquids

Birth/immediately following birth

If medically safe for me and my baby, I would like:

- To have a mirror available to help me see to push
- To have my partner cut the cord after delivery, if possible
- In the event I require a cesarean section, I would prefer to have my partner with me
- To have the baby placed on my chest in skin-to-skin contact immediately after delivery, unless my baby needs medical attention
- Personal request: _____

Feeding preferences:

- I would like to breastfeed immediately after my baby's birth
- I do not want my baby to receive bottles unless it's medically necessary
- I would prefer that my baby not be given a pacifier
- I am undecided about breastfeeding and would like more information
- Personal request: _____

Circumcision:

- I would like my son circumcised
- Personal request: _____

Umbilical cord blood banking:

- I plan to bank my baby's cord blood in a private cord blood bank - I will bring my collection kit with me to the hospital
- Personal request: _____

Other Notes

Name

Due Date

Partner

Partner's Phone

Physician/Group

Physician's Phone

Pediatrician

Pediatrician's Phone

