

Your Birth Plan

Are you in the early weeks of your pregnancy, thinking about baby names, or nearing the home stretch of your pregnancy, getting your nursery ready? Now is the time to be thinking about your birth preferences.

What is a Birth Plan?

The term birth plan can actually be misleading. It's less an exact plan than a list of your preferences concerning your labor, birth and hospital stay. A birth plan isn't a binding agreement, but rather a guideline of your wishes for your healthcare providers.

Why have a Birth Plan?

A birth plan isn't a must, and it is fine if you don't want to write one. Many couples don't bother with a birth plan because they are comfortable trusting their healthcare providers to help them make appropriate choices as the need arises. Other couples have strong opinions and expectations they want to share with their caregivers.

Where to start?

Spend some time together thinking about and prioritizing what you want. Consider the options available to you that may be discussed in your childbirth class or hospital tour. While forming a birth plan, you will also obtain more knowledge regarding the labor and birth process.

What questions does a Birth Plan answer?

1. What are your preferences during a normal labor and delivery?
2. What are your wishes for your baby's care in the first few days after birth?
3. What would you like to happen in case of unexpected events?

While in labor, be flexible and keep an open mind. Remember, a birth plan isn't a guarantee that your birth will go just as you planned it. By educating yourselves in advance, you will be less fearful and more empowered to make the best choices for you and your baby.

You may choose to use the following birth plan (on next page).



My Birth Plan

Date:

I, _____, am creating this birth plan prior to my labor to make my wishes clear to my doctor/midwife, and the nurses at the hospital. These are the items I feel are important regarding the birth of my unborn baby, and would like them to be followed as closely as possible whenever possible. I understand a circumstance might come up where either I may want to change my mind, or my doctor/midwife suggests that it is in my best interest to deviate from my birth plan. I will be flexible, however request to be kept informed of every aspect of my labor

My name:

My due date:

My provider's name:

My birth partners' names:

Environment: (Check all that are your requests)

- To control the temperature, lighting and sounds/music in my labor room
- Please allow all visitors to come and go as they please (up to three at a time)
- I only want visitors during the early stages of labor
- No visitors except for my birth partner(s)
- Do not allow these people: _____
- My doula/childbirth educator will be present.

Comfort Measures:

- Ice chips/clear liquids by mouth
- Position changes/walking for comfort
- Shower/jet tub to relieve pain
- Massage/breathing techniques

Pain Management:

- No medication at all: I want a drug-free birth
- Shots through the IV of medications such as Stadol
- An epidural when in active labor

Delivery:

- To use the birthing position of my choice
- To use self-directed pushing
- To use coached/directed pushing techniques
- An episiotomy only if necessary

Immediately After Delivery:

- Lay my baby on my abdomen/chest immediately
- Clean up my baby before placing him/her on my chest
- Delay cord clamping until pulsation stops
- My partner wants to cut the umbilical cord
- We are banking the cord blood
- To breastfeed my baby as soon as possible in Labor and Delivery
- Delay antibiotic eye ointment up to one hour
- I want visitors to see us in Labor and Delivery
- Just the new family in Labor and Delivery

Cesarean Section:

- I want to be awake for my C/S
- _____ will be my partner for my C/S (one only)
- Want to see/hold my baby in the operating room
- Have my baby skin-to-skin in the recovery room so I may bond/breastfeed
- Wait until I am situated in my room before my baby is brought to me

Postpartum Care:

- I _____ will be staying overnight in my room (one only)

Newborn Care:

- Breastfeeding only
- Breastfeeding and supplementing with formula
- Formula feeding only
- No pacifiers or artificial nipples given to my breastfed baby
- Circumcise my newborn son
- No circumcision

Other:

Thank you for taking the time to read my birth plan, which I have shared with my healthcare provider. Please keep me informed of anything that comes up that might cause me to deviate from it.

Sign

Date