

Birth Preference Considerations

(* = items that should be included in the birth plan to be presented to your caregiver and the hospital staff. The other items are mainly for your consideration and do not need to be in the hospital birth plan)

- Start of labor: where do you want to spend the beginning of labor and how long do you want to stay there? (Consider that if your water breaks first and you head to the hospital without a contraction pattern started, your caregiver will likely recommend starting Pitocin.) Do you want your doula to meet you at home or at the hospital?

-Transfer to the hospital: What does this look like for you? At what point would you want to consider transferring to the hospital? (Your doula will make the necessary transfer arrangements—i.e., calling your caregiver and the hospital-- if you so desire)

- Comfort measures: What do you want to have on hand to make you feel comfortable? You should be able to wear your own clothes during labor (sundresses and short stretchy skirts are perfect, as well as easy to remove tops—just make sure the clothes you bring are things you don't mind getting ruined!) Also, bringing items such as your own pillow and blanket can be very comforting as well.

*-Support People: Who will be in the delivery room with you during labor? Who will be with you during the actual birth?

*-Monitoring/IV: What kind of fetal monitoring would you prefer? Do you want intermittent or continuous? Remote or wired? How do you feel about a heplock (required by most facilities upon admission—you can make a request, however, for specific placement)]

*- Pain relief: What do you want as your primary and secondary forms of pain relief? How much and why do you want a pain medicine-free birth (if that is what you want)?

*-Induction/Augmentation: How open are you to induction and/or augmentation of labor? At what point would you want induction or augmentation? What are your primary and secondary preferences for induction or augmentation? (This item should be discussed with your caregiver in advance of labor.)

*-Pushing/Birth: Are there certain positions or ways you do or do not want to push in? How do you feel about “help” with birthing your baby (i.e., suction, forceps or episiotomy)?

*-After birth: Do you feel strongly about skin to skin and breastfeeding immediately after birth? Do you want delayed cord clamping? Is there something special you would like to do with your placenta?

*-Infant Routines: Do you want your baby to have a bath, vitamin k shot, hep b shot, eye ointment, or circumcision? Do you want your baby to stay with you exclusively or go to the nursery? Will you be breastfeeding exclusively? Do you want baby to wear a hat or would you like to maintain baby’s body heat through the use of your body heat (skin to skin) and warm blankets/towels?

*-Concerns or Emergencies: What do you want to do if the following situations were to arise?

-GBS: Antibiotics or no antibiotics? This may also change your preferences for the beginning of labor and transfer to the hospital.

-Meconium in the fluid: Babies with meconium stained fluid are typically observed much more closely than babies with clear fluid, including being taken away immediately after birth for suctioning and observation. How would you like to handle this?

-Fetal heart decelerations

-Respiratory difficulties: Grunting, retracting, and flaring are the signs and symptoms of respiratory distress after birth. How would you like it to be handled if your baby begins exhibiting these signs? Note: These are often signals of simply a difficult transition (the first hour) period for the baby and may be resolved by skin to skin contact.

-Maternal fever, low blood pressure, excessive bleeding

-C-section: Consider who you would like to accompany you, what kind of anesthesia you would prefer, if you would like to retain your requests for after birth (delayed cord cutting, skin to skin, etc.) –

Remember to make three copies...one for your chart, one for yourself and an extra copy. Have your caregiver review your birth plan at one of your regularly scheduled appointments and remember to pack the other copies in your hospital bag. It is also a good idea to include the language “we respectfully refuse/decline” or “request” in your plan along with providing the baby’s gender and name (if you know them and are okay sharing them).