

Birth Plan Tips

- Make your birth plan fit on one page for quick reference, double sided is ok!
- Please bring four copies: the L&D nurse, the doctor, the postpartum nurse, and one extra for you!
- Include your name, the names of those who will be present to support you, your doula if you have one, and your baby's planned name (if you want!)
- Labor and Delivery are beautiful but also unpredictable. Please understand that a healthy baby and healthy mom are the most important factors to your providers, followed very closely by your empowerment and preferences for your birth experience. To this end, you are always included and updated in the discussions and decisions regarding your labor.
- We list below many practices that we implement and work with regularly at OBGYN North. We hope it is helpful to you as you think about what preferences you may have for your labor and birth.

Labor

I would like to be free to walk around during labor.

I wish to be able to move around and change positions at will throughout labor.

I will be bringing my own music and speaker to play during labor.

I would like the environment to be kept as quiet as possible.

I would like the lights in the room to be kept low during my labor.

I would prefer to keep the number of vaginal exams to a minimum.

I do not want any IV fluids unless I cannot drink sufficient fluids (such as from nausea) or become dehydrated. I understand that a saline-lock IV base is required in the hospital.

Monitoring

I wish to have intermittent fetal monitoring unless the condition of my baby or my labor requires continuous fetal monitoring for safety (ie if receiving pitocin, if VBAC, or if baby is having trouble tolerating labor).

I do not want an internal monitor unless the baby has shown some sign of distress.

Labor Augmentation/ Induction

I do not wish to have the amniotic membrane ruptured artificially unless signs of fetal distress require internal monitoring.

If labor is not progressing, I would like to have the amniotic membrane ruptured before other methods are used to augment labor.

I would prefer to be allowed to try changing position and other natural methods (walking, nipple stimulation) before pitocin is administered.

Anesthesia/Pain Medication

I realize that many pain medications exist. I'll ask for them if I need them. Please do not ask my level of pain.

I would like to have an epidural.

Before considering an epidural, and if the situation warrants, I would like to try an injection of narcotic pain relief (Nubain, Demerol, Stadol or similar).

Cesarean

Unless absolutely necessary, I would like to avoid a Cesarean.

If a Cesarean delivery is indicated, I would like to be fully informed and to participate in the decision-making process.

I would like ____ present at all times if the baby requires a Cesarean delivery. I understand if it is a dire emergency that this may not be possible.

I would like to see the baby as soon as possible after birth, before the cord is cut or before being handed off to the nurse if possible.

If the baby is not in distress, I would like the baby to be placed skin-to-skin with me or my birth partner immediately after birth.

Vaginal Tears & Episiotomy

Please provide warm compresses during pushing to reduce the risk of large (3rd and 4th degree) perineum tears.

Please provide support to protect the perineum during delivery. I am practicing ahead of time by squatting and doing perineal massage.

I would appreciate guidance in when to push and when to stop pushing so the perineum can stretch.

If possible, I would like to use perineal massage to help avoid large tears and/or the

need for an episiotomy.

I would prefer not to have an episiotomy unless absolutely required (in very rare cases) for the baby's safety or to avoid a 4th degree vaginal-anal tear. [Standard OBGYN North Practice]

Delivery

I would like to be allowed to choose the position in which I give birth, including squatting or hands and knees. I understand some positions are more difficult to provide perineum support.

I would like a mirror available so I can see the baby's head when it crowns.

I would like the room lights turned low for the actual delivery.

I would like the room to be as quiet as possible when the baby is born.

I would like to have the baby placed on my stomach immediately after delivery. I understand that with delayed cord clamping, the cord is usually not long enough for the baby to be on my chest.

Immediately After Delivery

I would like to have _____ (partner, mom, myself) cut the cord.

I would prefer delayed cord clamping (1-3 minutes is standard practice for OBGYN North). More than 5 minutes is not recommended due to concern for maternal hemorrhage and neonatal jaundice.

I would like to hold the baby while I deliver the placenta and any tissue repairs are made.

I plan to keep the baby near me following birth and would appreciate it if the evaluation of the baby can be done with the baby on my abdomen, with both of us covered by a warm blanket, unless there is an unusual situation.

If the baby must be taken from me to receive medical treatment, my partner or some other person I designate will accompany the baby at all times.

I would like to delay the eye medication / vitamin K / hepatitis B immunization for the baby until 2 hours after birth.

I would like to donate or bank the umbilical cord blood, and have made arrangements to do so.

I would like to see the placenta after it is delivered.

I would like to keep/encapsulate the placenta and have made arrangements to do so.

Postpartum

Unless required for health reasons, I do not wish to be separated from my baby.

I would like to have the baby “room in” and be with me at all times.

I would like to have the baby “room in” after I have had some time to recover.

I would like the baby with me during the day but in the nursery at night.

I would prefer the baby be kept in the nursery and brought to me upon request and/or for breastfeeding.

Breastfeeding

I plan to breastfeed the baby and would like to begin nursing very shortly after birth.

Unless medically necessary, I do not wish to have any bottles given to the baby.

I do not want the baby to be given a pacifier.

I do not plan to breastfeed the baby.

Circumcision

I do not want the baby circumcised

I do want the baby to be circumcised, and understand I need to make an appointment at the clinic after 2 weeks and before 4 weeks of life for this procedure.

Photo/Video

I would like to take still photographs during labor and the birth. I understand videography is prohibited at NAMC.

I would like someone to photograph the cord cutting.

I have written permission for my partner to take photos of my private areas during birth. (Including this on the birth plan counts as written permission).