

The Perfect Birth Plan for You!

...a birth preference worksheet



You can never really plan your birth. How it plays out - when labour starts, how fast it goes, etc. is not in your control. So why create a birth plan? A birth plan will allow you to educate yourself around the choices you DO have during your birth and to let your birth team know exactly what you need in order to feel supported and taken care of.

Creating a personal birth plan will prepare you for your birth, allow you to become familiar with the pros and cons of each option available to you, and help you create the best possible birth experience for you and your baby.

Your birth plan should be less than a page; that is not a lot of room so be sure to note what is most important to you and your family. Go over your birth plan with your care provider at around 36 weeks and have several copies made for the day of your birth.

The following are some of the options you might consider when working on your birth plan. Once you've researched/reflected on your choices, you can size it down to your priorities.

During labor would you like:

- To bring music?
- To dim the lights?
- To wear your own clothing?
- To take pictures and film the birth?
- What else would help you feel comfortable in your labour room?

How would you like labor to begin?

- Would you like labour to start naturally, even if you go "post dates"?
- Are you comfortable with the idea of induction, how do you feel about:
 - Stripping Membranes?
 - Prostaglandin Gels?
 - Pitocin?

Once you are in labour would you like:

- To labour at home as long as possible?
- The option to return home if you are not in active labour when arriving at the hospital?

Once you are admitted to the hospital (if choosing a hospital birth):

- How would you feel about an IV or a saline lock? Have you ever had an IV before?
- Do you feel like you will be able to stay hydrated and nourished by eating and drinking?

Who do you want with you in your labour room?

Are you comfortable with having medical staff and residents in attendance?

Do you wish to have freedom to move and walk as you choose?

As long as you and the baby are doing fine, would you like:

To monitor the baby's HR intermittently rather than using a Continuous Electronic Fetal Monitor?

To refuse the use of Internal Heart Rate Monitors unless medically necessary?

To allow labour to move at it's own pace, free of stringent time limits?

For any discomfort during the first stage of labour (dilation) would you like to try:

Changing positions?

- Walking
- Standing
- Hands & Knees
- Sitting
- Squatting

Equipment?

- Birthing Ball (exercise ball)
- Birthing Bar
- Birthing Tub

Non-medical comfort techniques?

- Acupressure
- Bath/Shower
- Breathing techniques/Distracton
- Self Hypnosis
- Massage
- Hot/Cold Therapy (Ice, Hot Packs)
- TENS machine

What are some other coping techniques you may have used in your life that you can bring into your birth? What do you do when your feeling sick, have a cold, or are under stress?

How do you feel about the use of pain relief medication during your birth?

Do you want to have a natural birth?

Would you like your caregivers to let you know when a good time to use medication would be? Or would you prefer to ask for it, only when/if you feel like you need it?

Do you have a goal of 4cm dilation or more before the use of pain relief medication?

If you are comfortable with the use of medication would you prefer?

- Regional analgesia (an epidural and/or spinal block)
- Systemic medication (nitrous oxide and/or Demerol)

What if labour slows or stalls?

Would you like to try natural means to speed it up, such as walking, eating, changing positions?

How do you feel about breaking waters as a means to speed labour up?

What about medication such as Pitocin?

How do you think you would feel if labour began to slow down? How long or short would you like your labour to be?

During the second stage of labour (“pushing”) would you like to try different positions, such as:

- Semi reclining?
- Side lying?
- Squatting?
- Hands and knees?
- What ever feels right at the time?

When it is time to push would you like:

To do so instinctively, bearing down when your body gives you the “urge to push”?

To be coached on when to push and for how long?

During the birth would you like:

To view the birth with a mirror?

To touch your baby’s head as it crowns?

For the room to be as quiet as possible?

To risk a tear or birth over an intact perineum rather than an episiotomy?

Your partner to help catch the baby?

If you have a Cesarean birth would you like:

Your partner with you at all times, even during administration of the spinal block?

Your doula to remain with you during the birth for support and information?

To have the screen lowered a bit so you can see the birth of your baby?

Your partner to hold the baby skin to skin after the birth?

To breastfeed your baby in the recovery room?

If a Cesarean birth became necessary, how would you feel? What could you do to ensure that this birth is still a positive experience?

After the birth would you like:

To wait for the umbilical cord to stop pulsating before it is cut and/or collect blood for cord blood bank?

To deliver placenta naturally or choose active management of 3rd stage (pitocin to help the uterus contract and deliver the placenta)?

To hold your baby right away, skin to skin, putting off any procedures that are not urgent, such as:

- erythromycin for the baby's eyes?
- routine vitamin k?
- swaddling?
- diapering?
- washing off vernix?

To breastfeed as soon as possible?

Your partner to cut the umbilical cord?

How do you feel about the use of routine oxytocin after you deliver your baby?

Do you plan to:

Breastfeed exclusively?

If your baby is a boy would you like him to be circumcised?

Stay in the hospital overnight? Will your partner be staying, will they need a cot?

Would you like to have a private room?

For more information on creating a birth plan or to find labour & postpartum support please visit:



www.bebomia.com
info@bebomia.com

The Birth Plan Checklist

...let's get it all down in one spot



During early labour I would like:

- | | |
|--|---|
| <input type="checkbox"/> A birth doula present | <input type="checkbox"/> Soft music or hypnobirthing CD |
| <input type="checkbox"/> The lights down low | <input type="checkbox"/> To wear my own clothing |

I would like labour to begin:

- Naturally, when my baby and body are ready
- By induction only if medically necessary, starting with the most gentle means:
 - Stripping membranes
 - Prostaglandin gels
 - Pitocin
 - Artificial rupture of membranes

During labour I would like:

- | | |
|---|---|
| <input type="checkbox"/> To labour at home as long as possible | <input type="checkbox"/> Saline lock if antibiotics are necessary |
| <input type="checkbox"/> To return home if not in active labour | <input type="checkbox"/> Intermittent fetal monitoring |
| <input type="checkbox"/> To eat and drink as I please | <input type="checkbox"/> To move and change positions freely |
| <input type="checkbox"/> No routine IV | <input type="checkbox"/> To use tub/bath and birth ball |

For pain relief I would like to use:

- | | |
|--|--|
| <input type="checkbox"/> Hypnosis techniques | <input type="checkbox"/> Demerol |
| <input type="checkbox"/> Breathing, relaxation & massage | <input type="checkbox"/> Epidural |
| <input type="checkbox"/> TENS unit | <input type="checkbox"/> Nitrous Oxide |
| <input type="checkbox"/> Acupressure, hot/cold therapy | <input type="checkbox"/> I plan to birth naturally |

If labour slows or resists I would like:

- To use only natural methods such as walking, acupressure and nipple stimulation to move labour along.
- Augmentation of labour **ONLY** if medically necessary:
 - artificial rupture of membranes
 - pitocin

During second stage of labour I would like:

- To birth in a position of my choice
- To touch head or view head in mirror
- To push spontaneously
- To avoid forceps/vacuum extraction
- To push as directed
- Oil & massage to help with crowning
- To push free of time limits
- Episiotomy only if medically necessary

After the birth I would like:

- My partner to cut the umbilical cord
- Delayed cord clamping
- Cord blood (and/or peristem) to be collected for banking purposes
- To donate the cord blood stem cells to a public bank if possible
- To deliver the placenta naturally, as long as there is no medical urgency
- Active management (pitocin) for 3rd stage of labour

For the baby I would like:

- Immediate skin to skin contact for bonding and/or breastfeeding
- Delay of routine baby procedures for at least one hour for bonding purposes

Important: The information in this birth plan is for educational purposes only. Please discuss all aspects of your birth plan with your healthcare provider prior to your due date.