

Birth Plan Worksheet

I/We understand that birth is a natural process that cannot be 'planned.' This document contains our wishes for care during labor and birth.		
Mother's Name:		
Partner's Name:		
Baby's Name:		
Attendants I'd like the following people to be present during labor and/or birth:		
Labor induction/augmentation		
If I go past my due date and there are no health risks for me or my baby, I would prefer:		
□ Not to be induced□ To be induced		
If induction is necessary, I would prefer trying the following methods to induce labor: (chose any of the following):		
 Stripping or breaking the membranes Breast stimulation Walking Pitocin 		

□ Protoglandin		
Amenities I'd like to: bring music dim the lights wear my own clothes during labor and delivery take pictures and/or video during labor and delivery		
Hospital Admission and Procedures Admission		
□ I'd like the option of returning home if I'm not in active labor.□ I'd like to remain in the hospital for early labor.		
Once I'm admitted, I'd like:		
 my partner to be allowed to stay with me at all times only my practitioner, nurse, and guests to be present (i.e., no residents, medical students, or other hospital personnel) to try to stay hydrated by drinking clear fluids instead of having an IV to have a heparin or saline lock (IV) to walk and move around as I choose 		
Interventions As long as the behy and I are doing fine. I'd like to		
As long as the baby and I are doing fine, I'd like to: □ have intermittent rather than continuous electronic fetal monitoring □ If continuous monitoring is necessary, I would like a wireless (telemetry) monitor if it is available. □ be allowed to progress free of time limits and have my labor augmented only if necessary		
Labor Props If available, I'd like to try a:		
birthing stool or chairbirthing ball		

	squatting bar birthing pool or bath tub
I plan	Have no medications for pain relief. Have IV medications for pain relief. Have an epidural for pain relief. I'm not sure yet.
	Id like staff to: Check in with me about my pain relief options during labor Please don't offer me pain medication. I'll request it if I need it.
	I plan to use natural pain-management techniques including: breathing techniques/distraction, acupressure, bath/shower, hot/cold therapy, self-hypnosis, massage, medication other:
Push When	it's time to push, I'd like to: do so instinctively be coached on when to push and for how long be allowed to progress free of stringent time limits as long as my baby and I are doing fine I'd like to try the different positions for pushing (and birth) including: semi- reclining, side-lying, squatting, and hands and knees.
•	nal Birth g delivery, I'd like: to view the birth using a mirror to touch my baby's head as it crowns the room to be as quiet as possible my partner to help "catch" our baby
After I	birth, I'd like: to hold my baby right away, putting off any procedures that aren't urgent to breastfeed as soon as possible not to get oxytocin (Pitocin) after I deliver the placenta unless it's necessary

	to wait until the umbilical cord stops pulsating before it's clamped and cut
	my partner to cut the umbilical cord
If I ha	rean Birth Ive a c-section, I'd like: my partner present at all times during the operation the screen lowered a bit so I can see my baby being delivered the baby to be given to my partner as soon as he's dried, if appropriate to be skin-to-skin with my baby in the operating room to breastfeed my baby in the operating and/or recovery room
I'm pla	Blood Banking anning to: donate cord blood to a public bank (if available at my hospital) bank cord blood privately neither
_	partum delivery, I'd like: all newborn procedures to take place in my presence my partner to stay with the baby at all times if I can't be there
I'd like	24-hour rooming-in with my baby my baby to room-in with me only when I'm awake my baby brought to me for feedings only to make my decision later depending on how I'm feeling my other children brought in to see me and meet the new baby as soon as possible after the birth.
Feed: I plan	
Do <i>no</i> □	<i>t</i> offer my baby: formula

	sugar water
	a pacifier
Routi	ine Medications
	d like my baby to have the following newborn medications: Erythromycin eye ointment Vitamin K injection
	Hepatitis B vaccine
Circu	mcision
If my	baby's a boy:
	I want him to be circumcised at the hospital
	I'll have him circumcised later
	I don't want him circumcised
Disch	narge
I'd like	e to:
	be discharged from the hospital with my baby as soon as possible
	stay at the hospital as long as possible wait and see how I feel before deciding about the timing of hospital discharge