



# The Birth Place Options and Preferences

Name \_\_\_\_\_ Support person \_\_\_\_\_

Care Provider \_\_\_\_\_ Due date \_\_\_\_\_

My Baby's Care Provider \_\_\_\_\_

*When completed, you may submit this form to your delivering physician's office or bring it to The Birth Place. It is best to submit this form at 28-33 weeks of pregnancy during your pre-admission appointment, but you can submit it earlier if your questions about these items have been addressed.*

Listed below are several options/choices to consider as you plan your labor and birth. These items are discussed in childbirth preparation classes. Consider each of these options carefully and discuss them with your partner and then with your care provider. When making a birth plan, remember that it is important to be flexible. Add to the list anything else that you would like to include to help your care providers better understand your wishes for this labor and birth experience. We strive to honor your preferences while maintaining the safety of mother and baby.

The following checked or circled items best describe my preferences:

## LABOR

The following people will be present for the birth (circle all that apply):

husband/father      baby's siblings (please discuss this with your delivering physician)      doula      others

I would like to use the following comfort measures during labor (circle all that apply):

massage/touch      hot/cold packs      nourishment      shower/tub      music      position changes

other: \_\_\_\_\_

During labor I would like to use any or all of the following positions as needed (check all that apply):

- sitting                       standing                       lying on right or left side
- rocking                       birth ball                       sitting on the toilet
- walking                       hands and knees                       slow dancing

other \_\_\_\_\_

- I plan an unmedicated birth.
- I plan IV medication if needed.
- I plan a labor epidural if needed.
- I prefer intermittent fetal monitoring and use of the Doppler ultrasound.
- I prefer no internal monitoring unless medically necessary.

CONTINUES ON BACK ►



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## BIRTH

- During pushing, I would like to use a variety of positions such as squatting, side-lying, hands and knees, semi-sitting, legs and feet supported, sheet pull, dangle.
- I would like to avoid an episiotomy; please apply warm compresses and use perineal massage to allow for stretching.
- During pushing, I would like to use spontaneous bearing down and vocalizing.
- I will use directed pushing (prolonged breath holding) if needed.
- The baby's father/my support person would prefer to cut the cord, if possible.
- I would like to cut the cord.

## CORD BLOOD COLLECTION

- No plans to collect.
- Collection for personal use.  
Company \_\_\_\_\_.
- Collection for public donation.

## VAGINAL BIRTH

- Skin-to-skin contact.
- Mother to receive baby on her abdomen.
- Mother to breastfeed as soon after delivery as possible.
- Baby to remain with parents and newborn care to be done in parents' room - bathing, weighing, etc. when possible.
- Newborn medications delayed for up to one hour after birth.

## FEEDING

- I plan to breastfeed my baby.
- I plan to pump breastmilk and bottle feed it to my baby.
- I plan to formula feed my baby.
- I plan to feed my baby a combination of breastmilk and formula.

## PACIFIERS

- No pacifiers or bottles.
- Give only for painful procedures.
- Ask my permission before giving pacifier.
- Pacifiers are okay.

## CIRCUMCISION

- Declined, not to be done.
- To be done at hospital.
- Plan to do after discharge.

## CESAREAN BIRTH

*(up to two support people allowed in the operating room)*

- I prefer to have the father present during a cesarean birth.
- I prefer my doula/other companion be present during a cesarean birth.
- If possible, I prefer to be awake during the birth.

## IMMEDIATELY FOLLOWING A CESAREAN BIRTH

- Skin-to-skin contact on my chest if it is safe to do so.
- Mother to see baby in the delivery room.
- Father/companion to be with baby in operating room/nursery.
- Mother to hold and breastfeed infant during recovery, when possible.
- Baby to remain with parents and newborn care to be done in parents' room - bathing, weighing, etc. when possible.
- Newborn medications delayed for up to one hour after birth.