

# BIRTH PLANNING

When we speak of a birth plan, we are most often referring to the typed up document you hand to the labor and delivery nurse outlining your plans for your birth. You have actually already made a birth plan. It includes the caregiver you've chosen (or are preparing to choose), taking this class, where you will have your baby. There are certain things you will want to know as you prepare your birth plan, as you choose a caregiver and birth place (See Choosing a Caregiver), some possibilities you need to consider ahead of time and decide for yourself. There are other things you will want to know about to make your labor better. Not all of these things need to be on the final typed document, but I have included them here to jumpstart your planning process (or tweak the plans you've made). Not all of the items below will be important to you. Please use this list as a springboard for discussion with your caregiver and to help you prepare for the birth of your dreams.

## GENERAL STUFF YOU NEED TO KNOW OR CONSIDER AHEAD OF TIME

Items below are things to consider when choosing your caregiver and birth place. What are their policies? How do they do things? How is the hospital set up? What is your gut telling you about the birth place and caregiver? These items need not be on the final typed Birth Plan. These are decisions for which you must either take responsibility and accountability yourself or decide to follow caregiver's protocols.

- ❖ I expect that my practitioner and the hospital staff will seek my opinion, and that of my partner, on all issues that may affect my birth experience or that deviate from this plan.
- ❖ If I go past my estimated due date, I would like to wait to let labor begin naturally.
- ❖ I would like to walk to the labor and delivery room.
- ❖ I would like to stay in the same room for labor and delivery.
- ❖ If we arrive at the hospital and find that I am less than 5 centimeters dilated, I will leave and return when I sense some progress.
- ❖ If my water breaks, I would like to stay home and allow labor to begin naturally. (How long will you wait for labor to begin? What is your caregiver's policy? What precautions will you take?)
- ❖ I wish to use natural methods of augmenting labor (position change, nipple stimulation, ambulation). If it is early enough in labor to do these things, you shouldn't be at the hospital yet (in most cases).
- ❖ I wish to have my baby room in with me, with no separation. Some hospitals have mandatory separation from your baby, even for healthy babies delivered vaginally.
- ❖ My husband will be staying overnight.

## THINGS TO MAKE YOUR LABOR BETTER

Items below are some things that will make your labor not only more romantic, but also to progress more smoothly. Prepare your birth team to handle these and set boundaries so that these items are not necessary on the final typed Birth Plan.

- ✓ I would appreciate the following environment: lights dimmed, music of my choice, voices lowered and only essential staff in the room.
- ✓ I prefer a quiet birthing environment. Please avoid unnecessary talking.
- ✓ I would like to wear my own clothing during labor (and/or delivery).
- ✓ I would like my partner/doula to have the opportunity to film and photograph labor and delivery.
- ✓ I would like the hospital staff to know that I may have my own personal style to birthing - from walking,

moaning, trying different positions, etc. I would be grateful for the personal space to do this comfortable without feeling/being hushed or rushed. (Make sure your birth team is ready to educate the staff on your wishes.)

- ✓ I may be vocal during labor. I wish for my need to vocalize to be respected, even if I vocalize loudly.

### ITEMS FOR TYPED BIRTH PLAN

Remember:

- ★ The items below should be discussed with your caregiver or your hospital BEFORE you go into labor. Where appropriate, I have indicated which topics should be covered together, in the same visit to your doctor. When you have settled the topic with your caregiver, you should edit the statement to make it brief for the final typed Birth Plan.
- ★ The typed up, final Birth Plan you present to a Labor and Delivery nurse should be a summary of what you and your caregiver have already agreed upon. The birth plan you hand to the nurse will contain ONLY what she and the attending physician (just in case you get a back-up) need to know to do their job at your birth the way you would like them to do it.
- ★ All birth plans look alike. Make yours stand out. Put it on beautiful paper. Hand-write it. Put stickers on it. Make sure that nurses will smile when they read it.
- ★ One page maximum (How many points can YOU remember?)
- ★ Short, bulleted statements
- ★ It is ok to separate items into sections, but not necessary. Consider only a labor and postpartum section.
- ★ When you list items on the birth plan, list them in the order in which they will occur. For example, list “please keep the bed intact for delivery” before “dad would like to cut the cord”.
- ★ The items I think are most important for any Birth Plan are in **bold** below. Pick the hills you are willing to die on and be willing to negotiate with the other points. Make sure your spouse and birth team know which items are your most important.
- ★ Be sure to include the following information, right at the top of your birth plan:
  - Mother's Name**
  - Caregiver's name**
  - Due Date**
- ★ List labor support and relatives who will be attending, as well as their role at your birth. Start with:  
Father's/Partner's Name
- ★ Consider the number of visitors allowed (are there limits at your birth place?) and that all who attend your birth should have a function (see Preparing Your Birth Team).

☐ Discuss these topics with your doctor on the same visit, in this order:

- 1) **I would like the flexibility to be mobile and prefer not to have an IV.** If your caregiver agrees to no IV, then continue with a conversation about food and drink, point (3) below. If your caregiver is not comfortable with no IV, then back down to:
- 2) **I would prefer a heparin/saline lock (commonly called a hep lock).** If your caregiver agrees to either no IV or a hep lock, then move on to:
- 3) **I will be working very hard and would like no restrictions on food or drink.** If your caregiver agrees to food and drink during labor, smile, thank them and put these items on your final typed Birth Plan. If your caregiver is not comfortable with food and drink, back down to:
- 4) **At a minimum, I must have access to clear fluids like water, Gatorade, my teas, juices, Labor Aide, ice chips, Popsicles.**

- I prefer intermittent, rather than continuous, fetal monitoring as long as baby's condition indicates it is safe. (OR) I understand monitoring may be necessary for 15 - 20 minutes per hour, but wish to be able to walk freely for the rest of each hour as long as baby's condition indicates it is safe.**
- I prefer to allow my membranes to rupture spontaneously. (OR) No artificial rupture of membranes or stripping of membranes.**
- I would like my husband/doula to be present during all phases of labor and delivery and not excluded from my presence for any reason.**
- I would like to keep vaginal exams to a minimum, especially after my membranes have ruptured. Ideally, such exams will be limited to times when I feel significant change or progress. (OR) Vaginal exams only for indication of change
- I wish to avoid all pain medications. I will ask for pain medications if I need them. (OR) **No pain medication unless I request it.** (OR) Please offer only non-medical, non-invasive pain-relief methods such as massage, guided relaxation, shower/bath, position changes, heat and cold pads.
- I want the use of the shower, bathtub and/or Jacuzzi. I request that my husband be allowed to shower with me in order to give me a massage.
- I would like the freedom to walk, rock, use the bathroom and move as my body dictates. (OR) I want the freedom to walk about even after rupture of membranes.
- I would appreciate only positive comments, even if my progress does not match a specific timetable. (OR) I will be laboring on the timetable that is right for my body and my baby. I do not wish to be subjected to time restraints. (OR) No time limits on labor or pushing
- I wish to push only when I get the urge to do so.
- I do not wish to be coached how or when to push. When I am fully dilated, I trust my body's instincts to push my baby out naturally.
- I would like to be free of time limits on pushing.
- If you or the staff feel my pushing is not progressing efficiently, I would like to be encouraged to change positions.
- I prefer exhale pushing to the valsalva maneuver. I understand that in some instances it may be necessary for safety to get the baby out quickly and I trust that I will be instructed to hold my breath and push only under those circumstances.** (OR) I will be exhaling when I am pushing. I do not wish to be told to hold my breath. (NOTE: Have you shown your caregiver the exercise where you push both with and without exhaling?)
- I would like to have a mirror positioned so that I can see my baby being born. My doula or husband will remind me to look.
- I prefer a tear to an episiotomy. (OR) I would like to avoid an episiotomy.**
- I would like for my doula and/or my husband to apply warm compresses to my perineum and to apply oil to massage and stretch my perineum.
- I would like to be encouraged to breathe with my urge to push.
- I wish to have no use of forceps at all and vacuum extraction only if the baby is in distress.
- I would like to leave the hospital bed intact for delivery (no breaking down the bed).** Allows for freedom of movement.
- I would like to choose the position in which I give birth. I may choose squatting. (OR) I want to give birth in any position and place that feels comfortable for me. I do not plan to be on my back.
- I do not wish for the gender of the baby to be announced. We would like to make the discovery on our own.**
- I would like our baby to hear our voices first.

- I want soft lighting at the delivery.
- I want to be reminded to touch my baby's head as it emerges from my body. (NOTE: Who will remind you? Good job for your birth team.)
- I or my husband (or other special person) will cut my baby's umbilical cord after it has stopped pulsing.
- My husband wishes to catch the baby.

#### Postpartum

- I wish for the umbilical cord to be left intact until it has stopped pulsing.
- I would like for my baby to be placed on my chest immediately following birth.
- If warming is necessary, I want my baby to be warmed on my body, skin to skin, using warmed blankets or a hot water bottle.
- I would like to deliver the placenta without pitocin, uterine massage or cord tractions. If a procedure is necessary, please explain it to me.
- I would like to hold the baby while I deliver the placenta and any tissue repairs are made and continue to hold and bond with the baby for (an hour/fifteen minutes/ 3 hours/etc.) before she/he is examined.
- I would like to be released from the hospital as soon as possible after birth.

#### Postpartum Plans for baby

- I would like to give my baby a Leboyer bath (warm bath, low lights, soft music).
- I would like the baby to be bathed and evaluated in my presence.
- I would like to postpone baby's bath for 24 hours. (If baby becomes cold during the bath, staff will often keep baby in the nursery until their temperature comes back up. Avoiding bathing can help you avoid separation.)
- I plan to keep the baby near me following birth and would appreciate if evaluation would be done with the baby on my abdomen, with both of us covered by a warm blanket.
- If the baby must be taken from me to receive medical attention, baby's father will accompany the baby at all times.
- I would like to avoid the eye medication until several hours after birth.
- I waive administration of the eye medication for my baby.
- I would like to postpone any immunizations until a later time. (Discuss with your pediatrician beforehand. Then you can say: "My pediatrician and I have agreed to an alternative immunization schedule." It is more agreeable to most hospital staff.)
- I would like all procedures thoroughly explained and to have both mother and father present for any newborn procedures.
- If our baby is a boy, we will not be circumcising him. (OR) No circumcision. (OR) If our baby is a boy, we would like for him to be circumcised with/without local anesthesia. We would/would not like to be present for the surgery.
- I would like my other children to visit as soon as possible.
- I wish to have my baby room in with me, with no separation. My husband/partner will be staying overnight.
- I will be breastfeeding exclusively. Do not offer my baby formula, sugar water, pacifiers or artificial nipples. (OR) BREAST ONLY
- Should medical circumstances necessitate that my baby receive formula or other supplements to my breast milk, I wish for my husband (or other family member) to feed the baby with a cup or spoon.

### In the event of a cesarean section

- ◆ Please keep communication open. If a cesarean is indicated, I would like to be kept fully informed and to participate in the decision making process. Please wait for my express consent, and/or that of my partner, before beginning any procedure.
- ◆ It is important that my husband and my doula (and my midwife?) be present with me at all times during the birth. Ideally, I would like to remain awake and aware, avoiding general anesthesia.
- ◆ Please discuss anesthesia options with me.
- ◆ (NOTE: If you have had a cesarean...) Since I have had a cesarean, please use the same incision.
- ◆ I wish to have my hands free to touch my baby, outside of the sterile field, when she/he is born.
- ◆ I would like to video and photograph the birth.
- ◆ I would like a mirror in which I can view the birth of my baby.
- ◆ I would like for the drape separating my head from my body to be dropped so that I may view the birth of my baby.
- ◆ I would prefer that staff conversation be kept to a minimum. Please respect this event as the birth of my child.
- ◆ I would like a running account of the surgery. This will help me to know when we are getting close to the delivery.
- ◆ I do not wish for the gender of the baby to be announced. We would like to make the discovery on our own.
- ◆ I would like to hold the baby on my chest and nurse my baby in recovery as soon as possible, barring any complications.
- ◆ Please discuss with me postpartum medication if needed.
- ◆ I do not wish to receive any medication that will make me too sleepy to see my baby immediately.
- ◆ I want to be certain that any medication I take will not interfere with breastfeeding.

### Special care nursery

- ⇒ If my infant requires special nursery care, I request access to her/him at any time.
- ⇒ If my baby needs to be transferred to another hospital, I request that I be moved with her/him or that I have open phone contact with her/his nurse.
- ⇒ If our baby must be fed by a pump or other means, I would like to pump my breasts and provide my breast milk throughout the hospital stay.
- ⇒ If I am unable to provide adequate breast milk for my baby, I wish for my baby to receive donated breast milk.
- ⇒ Please do not give my baby sugar water or additional feeding.
- ⇒ Please do not give my baby a pacifier. Bring him or her to me or have me come to the nursery to provide the comfort needed.

### In the event of a stillbirth or premature death

- I would like for my baby to be washed/not washed and wrapped in a blanket/not wrapped in a blanket and given to me for contact immediately after delivery.
- I would like my partner and/or doula with me.
- I request privacy to hold my baby.
- I may wish to spend time with the baby, then rest, then see my baby again.
- I would like for family members to have the opportunity to visit our baby.
- I want copies of my baby's birth records.
- I want fingerprints and footprints of our baby to be put into our birth book.

- Please keep a small lock of the baby's hair.
- I would like to have pictures taken of my baby. (Now I Lay Me Down To Sleep is a free ministry that provides a professional photographer to come to the birth place and take pictures of baby and family. All photos will become your personal property. Some photographers provide photos, some a CD/DVD with pictures. [www.nowilaymedowntosleep.org](http://www.nowilaymedowntosleep.org))
- I would like to take my baby home and will require assistance in planning a home funeral.
- I will require assistance in making arrangements for our baby's burial. (Many funeral homes and cemeteries offer free or reduced costs for arrangements for an infant.)

Compiled and adapted from several sources and personal experience  
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