

Your Birth Plan

Planning for the birth of your baby is an exciting time. You have many choices to make for your labour, delivery and postpartum time. The Birth Plan will help you identify and communicate your wishes to your healthcare team and also for your own mental preparation of the time ahead. Please take some time to talk with your spouse/labour support person about the options you have available to you. Then, fill in this plan and give copies to the following people:

- Your healthcare provider (physician/midwife)
- The staff at the hospital (bring a copy in your labour bag)

Think of the Birth Plan as a way to tell about your preferences for your birth experience. Please understand that your options may change due to the medical condition of you or your baby

Personal Information

Your first name: _____ Your surname: _____

Name I like to be called i.e. Catherine = Cathy: _____

Your birth Partner name(s): _____

Relationship to you (Husband, mum, sister) _____

Other Birth Support: _____

Is this child your first child – **Yes / No**

Any previous labours or complications: _____

Anyone you **DON'T** want in the room who the midwives can politely turn away (friend, mother colleague) _____

Your due date: _____

Hospital Name _____

Preparation for Childbirth

- I attended a prepared childbirth preparation class
- I did not attend any prenatal classes.

Baby's Gender

- My baby is a boy. His name is _____.
- My baby is a girl. Her name is _____.
- I do not know my baby's gender

Environment in Labour Room

- I will bring my own music.
- I would like to have the lights dimmed.
- I would like to keep the room as quiet as possible.
- Aromatherapy oils

Hydration/Oral Fluids

A saline lock (an IV catheter capped with a small plug) is the minimum standard of care

- I would like to have clear fluids during my labour (examples - water, ice chips, glucose water, and clear juices)
 - I would prefer to have fluids through an IV
- IV fluids will be necessary with an epidural. Please discuss this with your healthcare provider*

Fetal Monitoring

- If I meet low risk criteria, I would like intermittent fetal monitoring.
- I would like to have my baby monitored continuously with an external fetal monitor.

Comfort Measures/Pain Relief

You will receive ongoing support and encouragement throughout labour.

I would like to try the following coping strategies:

- Walking
- Birth ball
- Breathing & relaxation techniques
- Other: _____
- Position changes
- Bath/shower
- Massage

Pain Medication (during labour/delivery)

- I plan to labour without the use of pain medication.
 - I will ask for pain medication if I need it.
 - I would like to have the nurse offer me pain medication.
- If I ask for pain medication, I would like to consider using:*
- IV medication
 - An epidural
 - Entonox (gas & Air)

Progress of Labour

Rupture of Membranes

- I would prefer to have my membranes rupture naturally, without intervention.
- I think it is fine if my healthcare provider ruptures the membrane.
If labour is not progressing, I would like to try the following:
 - Walking with my support person
 - Rocking in the rocking chair
 - Rupture my bag of waters
 - Begin Pitocin (a medication used to stimulate contractions)

Vaginal/Cervix Examination

- I would like minimal examinations
- I am happy for examinations as deemed necessary by the medical staff
- No monitoring except for emergency situations

Pushing

When it is time to push, I'd like to:

- Push instinctively, in response to my body's cues.
- be coached on when to push and for how long (most common with an epidural).

I would like to use the following positions for pushing:

- Semi-reclining
- Positions that are comfortable at the time

Warm compresses / perineal massage:

- I would like warm compresses applied to the perineum while pushing.
- I have been using perineal massage to prepare the perineum for birth.

Vaginal Birth

I would like to:

- view the birth using a mirror.
- avoid having an episiotomy (an incision to enlarge the vaginal opening for birth).

Other:

Cutting the umbilical cord:

- I would like to have _____ cut the cord.
- My labour partner does not want to cut the umbilical cord.

Greeting My Baby

I would like to:

- have the baby placed skin-to-skin on my abdomen immediately after birth.
- have my baby cleaned off before being placed skin-to-skin.
- hold my baby as soon as possible, putting off procedures that aren't urgent.

Infant Feeding

During my stay in the hospital:

- I plan to breastfeed.
- I plan to formula feed.

Circumcision

If my baby is boy:

- I do not want to have him circumcised.
- I would like to have him circumcised at the hospital.
- I will have him circumcised later.

Caesarean Birth

If I have a caesarean birth (surgical delivery of my baby through an abdominal incision), I would like

To have:

- My labour support person present.
- the umbilical cord left long so my labour support person can cut it shorter.
- The baby given to my labour support person as soon as possible.

Other:

Any additional preferences you have for your birth experience. You may have special routines, traditions or expectations that are part of your beliefs about birth or family/faith heritage.

Mum's Signature

Date

TIP

- ❖ It might be useful for you and your birth partner to agree on a special word which you can use if you are not happy with something that is happening but find it hard to verbalise it. You can easily change your mind during labour, but it is not always easy to get your point across. Share this with your birth partner or doula if you are using one.