



Birth Plan

What Kind of Care Will I Receive?

As you prepare to give birth, you may be starting to consider all of the options available to you on that special day. Creating a birth plan can help you to review your choices, and to communicate your preferences with the doctors, midwives, and nurses, who will be caring for you and your newborn. We know that labor, delivery, and the postpartum period may hold unexpected surprises, and that things don't always go as planned. While no one knows what the future holds, we value both your safety and experience, and will work closely with you in order to honor your expressed desires while keeping safety our top priority.

Our Philosophy & Standard of Care

Giving birth can be one of the most meaningful times you and your family will ever experience. At Community Memorial Healthcare, we believe in family-centered maternity care, and strive to treat each woman and family with respect and support.

- We strongly encourage women and their partners to prepare by taking Prepared Childbirth Classes.
- We support women's choices in childbirth, whether they choose a natural childbirth, or prefer to experience as little pain as possible during labor and delivery.
- We encourage the use of coping techniques, such as breathing, relaxation, touch techniques, heat, cold, movement, and hydrotherapy.

In order to ensure a safe and supportive birth experience, we ask that you discuss your birth plan and preferences with your doctor or midwife before you arrive in Labor & Delivery.

- We encourage skin-to-skin contact for all mothers and babies.
- We encourage and support exclusive breastfeeding. At the same time, we commit to supporting individual parent's feeding decisions for their babies. Our nurses are trained to provide breastfeeding assistance during your stay and we also offer unlimited free lactation consultations and breastfeeding support groups after discharge.
- We routinely delay newborn procedures, such as weighing, measuring, and administering newborn medications, to allow time for bonding and/or breastfeeding.
- We routinely delay the first bath for 8 to 12 hours in order to allow babies to normalize and regulate their temperature (unless there is an earlier bath is necessary for medical reasons).
- We do not offer or recommend pacifiers, except during painful procedures, and for our babies in the NICU.
- We routinely use regional anesthesia (spinal or epidural) for cesarean sections. Exceptions will be made based on your physician's recommendations to ensure a safe delivery for you and your baby.

Additional copies available at www.mycmhbaby.org



My Birth

Mother _____

Physician/Midwife _____

Partner _____

Pediatrician/Family Doctor _____

Baby _____

Doula _____

I understand the importance of collaborative care in planning for a safe and supportive birth experience. I have discussed my birth plan and preferences with my doctor or midwife before labor.

ENVIRONMENT

- ☐ I would like to limit the number of guests in my room while I am in labor by having a sign posted on the door to my labor and delivery room
- ☐ I would like to have the lights dimmed during labor
- ☐ I plan to bring in music from home (my own MP3 player, CD player, etc.)
- ☐ I plan to bring in essential oils/aromatherapy (no flames, please)
- ☐ I plan to bring in a focal point from home

LABOR

- ☐ I would like to have freedom of movement while I am in labor (walking, standing, sitting, kneeling, using the birth ball, etc.), if safe and possible
- ☐ I would like to have my IV capped off (saline locked) so that I am free to move around during labor
- ☐ I would like to have the option to use hydrotherapy (shower or Jacuzzi tub)
- ☐ I would prefer natural childbirth (no pain medications or epidural)
- ☐ Please do not offer me any sort of pain medications; if I decide to use pain medication or an epidural, I will ask for them
- ☐ I plan to use IV pain medication to cope with the pain of labor and birth
- ☐ I plan to use an epidural to cope with the pain of labor and birth
- ☐ I am considering using pain medication or having an epidural, but will decide when I am actually in labor
- ☐ I would prefer to wait for the amniotic membrane (bag of waters) to rupture spontaneously; if the need to have my water broken arises, please discuss this with me before breaking my water

BIRTH

- ☐ I would like to use a mirror to view the birth of my baby
- ☐ I would like _____ to cut the umbilical cord
- ☐ I would like to have delayed clamping and cutting of the umbilical cord, if safe and possible
- ☐ I am planning to bank my baby's cord blood



CESAREAN SECTION

- ☐ While I am in the operating room, my support person will be _____
- ☐ I would like to ask my anesthesiologist if the screen could be lowered so that I can watch the birth of my baby
- ☐ If my anesthesiologist determines that it is safe and possible, I would like to have an arm left free so that I can touch my baby
- ☐ I would like to have my support person cut (shorten) the umbilical cord

NEWBORN CARE

- ☐ I would like all newborn procedures and medications explained to me before they are carried out or administered by the staff
- ☐ If my baby needs to leave my side for any reason, I would like _____ to accompany my baby, and to remain present for all procedures
- ☐ I would like to be present for my baby's first bath
- ☐ If my baby is having a painful procedure (circumcision, metabolic screening, etc.) and a pacifier or sugar water would be routinely used, I would like to be consulted first
- ☐ If my baby needs formula for a medical reason, I would like to be informed first
- ☐ If my baby requires ongoing supplementation, I would like help from my nurse in learning how to hand express or pump my own milk for my baby
- ☐ If I have a boy, I plan to have him circumcised

ADDITIONAL PREFERENCES _____
