



# Birth Plan Worksheet

This sheet is intended as a tool to help you complete your individualized birth plan. Ask your Doctor or Midwife about the usual way they handle the labor and birth options below. Then discuss your thoughts and feelings about them. Be flexible and willing to negotiate, yet communicate your needs as well. Please write your agreed upon preferences on “Your Birth Plan” sheet.

## **Introduction Section:**

### **Labor Support Team:**

- Father/Partner
- Relatives
- Friends
- Doula (trained labor support person)
- Siblings – Please designate a support person just for them.

This team can be present for some or all of your labor and delivery, whichever you prefer.

## **First Stage Labor Preferences:**

The first stage of labor is defined as the time between the beginning of labor until pushing begins.

### **Birth Environment and Labor Support Needs:**

The supportive, caring environment is tailored to what you prefer at the Family Birth Center:

1. Lights can be dimmed or bright.
2. Visitors and family are allowed as patient desires, and patient may either have an intimate atmosphere with just their partner or a celebratory atmosphere with family & friends.
3. Can bring your own favorite objects or focal points.
4. Decide if you want camera or video pictures taken, by whom, what and when.
5. Can request a “*Please knock*” sign on the door and specified visitors only, or as desired.
6. Mom can wear her own clothing or a hospital gown.
7. Phone calls can be transferred to patient room or held.
8. May bring “boom box” for music, if desired.
9. There is a small kitchen/snack area close to the nurses’ station. It contains soda pop, coffee, hot water, ice machine, and crackers.

A 20 to 30 minute monitor strip will be done on admission to determine your baby’s well being. Then you may be encouraged to try these options: shower, Jacuzzi, and walking while alternating with resting positions in chair or using the birth ball. We understand your needs will change during this time and we want to know what you would like to try for coping strategies.

What would you prefer for your atmosphere and labor support needs? Please put those needs in the space provided on “Your Birth Plan” or on a separate sheet if necessary.

### **Pain Management:**

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1. We encourage you to remain open and flexible to these options because each labor and baby are unique and each requires different approaches to pain management.
2. Basically, there are three categories of choices:
  - a. No medication (natural childbirth). Use of coping strategies and comfort measures such as shower or Jacuzzi are used to help mother through labor.
  - b. Mother will request medication if desired. Coping strategies and comfort measures are initiated and patient decides when to ask for pain medication.
  - c. Mother would like as much pain relief as possible. Some options for pain relief are Stadol (given IV), epidural/intrathecal (administered in lower back) and PCEA (Patient-Controlled Epidural Anesthesia).
3. Do you have any additional concerns or requests for pain management? Please feel free to write those in the space provided on “Your Birth Plan” as well as which of the three options you are likely to choose for management of labor.

### **Medical Interventions:**

You and your doctor/midwife may find it necessary to use some medical interventions such as: induction of labor, IV's, Pitocin, internal monitoring, and breaking the bag of water. Do you have any concerns or questions about any interventions? Write those in the space provided; use additional paper if necessary.

## **Second Stage and Birth Preferences**

**Second stage begins when the mom starts pushing and ends with the delivery of the baby.**

### **Positioning and Pushing:**

We use a variety of different positions and techniques for pushing. Here is a list of a few of them.

### **Pushing Techniques:**

- Instinctive (Mother follows body's urge to push)
- Breathe hold (5-6 seconds is usual). Counting is done by coach, support person, nurse or Doctor/Midwife.
- Directed by caregiver (Doctor/Midwife or nurse)

### **Positions:**

We usually have our Moms try semi-sitting on birthing bed, with legs supported by support people, coach and/or nurse. Stirrups are available if desired. You also have the option of lying on your side, sitting up, or squatting with a bar to hold on to. Please write your preferences for these in the space provided on “Your Birth Plan.”

### **Medical Interventions:**

At times, some of these interventions may be necessary to accomplish the birth: vacuum extractor, forceps, and episiotomy. Do you have any special concerns about any of these interventions? Please write them on “Your Birth Plan.”

### **Welcoming our Baby:**

How do you want to welcome your baby into the world? Usually the mother cradles the baby as it emerges, and voices are kept quiet with the lights dimmed. The cord can be cut by the father/partner and then the baby is laid on the mothers' tummy and wiped dry and covered with a warm



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blanket. Mother and father are encouraged to touch, hold and talk to the baby right after it is born and if Mom is breastfeeding, the baby is encouraged to nurse within the first hour after birth.

Is there anything else we can do to help create your special moment? Please write these in the space provided on “Your Birth Plan.”

## **Unexpected Labor Events**

### **Complicated or Prolonged Labor:**

Sometimes, unforeseen complications can occur during labor or delivery. Everything will be done to assure that you and your baby have a safe birth. Do you have any concerns or questions? Please put those in the space provided. (Use additional paper if necessary.)

### **Cesarean Birth:**

Designate a person to be with you as a support person in the C-Section room. They can use a still camera - no video taping in the C-Section room. Usually, the baby is shown to the Mom and support person as soon as it is born, then it is taken into an adjoining room for evaluation for approximately 5 minutes. The Father/Support person can go with the baby for this, and usually they can carry the baby back into the C-Section room for the Mom to see again. After that visit, the Father/Support person goes with the nurse to the labor room, and the baby is weighed, measured and given a bath. It takes 30-40 minutes after the baby is born for the Mom to return to her room for a 2-hour recovery period.

## **Postpartum Care of Mother**

We will check vital signs, bleeding and the firmness of the Mothers uterus often during the first 2-hours after delivery. We encourage rest and that you ask if you have any question or concerns about your health or your baby's. Decide how many and how often you want to have visitors. Fathers/coaches and siblings aren't considered visitors and can be in the room anytime. You can usually have what you like to eat and drink.

### **Discharge Follow-up:**

Find out from Doctor/Midwife about when to make next appointment and review written instructions given to you before discharge. If you have any needs for additional information or help, please let us know on the birth plan.



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