

## Birth Plan Options

In order to better communicate your hopes and plans for your birth to your birth team, please consider the following in developing your birth plan. Look at the procedure/practice in the left column, then the alternatives in the center column, and write your comments/choices in the right column. You can then write your birth plan from your comments in the column on the right.

| PROCEDURE/<br>PRACTICE     | OPTIONS   | COMMENTS/CHOICES |
|----------------------------|---|------------------|
| <b>Onset of labor</b>      | <ul style="list-style-type: none"> <li>Spontaneous</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Self-induced at home: nipple stimulation, love-making (as long as membranes haven't ruptured), enema, castor oil.</li> </ul>               |                  |
|                            | <ul style="list-style-type: none"> <li>Induced after fetal maturity studies for medical reasons.</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Medical or surgical induction: artificial rupture of membranes, prostaglandin gel, IV Pitocin (oxytocin), Cytotec (misoprostol)</li> </ul> |                  |
| <b>Early labor</b>         | <ul style="list-style-type: none"> <li>Stay home until labor is active</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Go directly to hospital</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Go to hospital to be checked, return home until active labor</li> </ul>  |                  |
| <b>During labor</b>        |   |                  |
| <i>Enema</i>               | <ul style="list-style-type: none"> <li>Not routinely given</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Self-administered at home</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Can be requested at the hospital</li> </ul>  |                  |
| <i>Shave</i>               | <ul style="list-style-type: none"> <li>Not routinely done</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>Clip hair around vaginal opening</li> </ul>  |                  |
| <i>Presence of others</i>  | <ul style="list-style-type: none"> <li>Mother's choice</li> </ul>   |                  |
| <i>Labor positions</i>     | <ul style="list-style-type: none"> <li>Walking/active labor encouraged</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>May use variety of positions on bed</li> </ul>   |                  |
| <i>Hydration/fluids</i>    | <ul style="list-style-type: none"> <li>Water, fruit drinks, popsicles, broth, crackers, toast. Begin at home.</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>Ice chips only</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>IV fluids (when medically indicated)</li> </ul>  |                  |
| <i>Vaginal exams</i>       | <ul style="list-style-type: none"> <li>At mothers request</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>When labor changes</li> </ul>  |                  |
| <i>Fetal Heart Monitor</i> | <ul style="list-style-type: none"> <li>As much or as little as you and your team agree on</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>Doptone only if monitor not available</li> </ul>   |                  |
|                            | <ul style="list-style-type: none"> <li>Fetoscope rather than doppler for monitoring</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>Intermittent external electronic monitor</li> </ul>  |                  |
|                            | <ul style="list-style-type: none"> <li>Continuous electronic monitoring -- internal</li> </ul>  |                  |

|                              |   |  |
|------------------------------|---|--|
|                              | or external, only when medically indicated  |  |
|                              |   |  |
| <i>Pain relief</i>           | <ul style="list-style-type: none"> <li>Relaxation, breathing, comfort measures, change positions, birth assistant</li> </ul>            |  |
|                              | <ul style="list-style-type: none"> <li>Medications, anesthesia, only at mother's request -- NO offers</li> </ul>                        |  |
|                              | <ul style="list-style-type: none"> <li>Medication routine, including narcotics, regional anesthesia (epidural, spinal, etc.)</li> </ul> |  |
|                              |   |  |
| <i>Augmentation of labor</i> | <ul style="list-style-type: none"> <li>Walking, changing position, shower</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Nipple stimulation</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Intimacy with partner</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Enema in active labor</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Rupture of membranes</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Pitocin</li> </ul>   |  |
|                              |   |  |
| <i>Urination</i>             | <ul style="list-style-type: none"> <li>Walk to toilet as needed</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Bed pan</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Catheterization</li> </ul>   |  |
|                              |   |  |
| <b>During Birth</b>          |   |  |
| <i>Position</i>              | <ul style="list-style-type: none"> <li>Mother's choice</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Labor/birthing bed</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Squatting with "squat bar"</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Birthing chair/stool</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Lithotomy/stirrups</li> </ul>  |  |
|                              |   |  |
| <i>Expulsion</i>             | <ul style="list-style-type: none"> <li>Spontaneous, exhale pushing</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Directed, sustained pushing</li> </ul>   |  |
|                              |   |  |
| <i>Speed Up Birth</i>        | <ul style="list-style-type: none"> <li>Gravity-enhancing positions</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Encouraging position changes every 20 minutes</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Prolonged pushing on command</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Episiotomy if necessary</li> </ul>   |  |
|                              | <ul style="list-style-type: none"> <li>Vacuum extractor/forceps -- only if medically indicated</li> </ul>                               |  |
|                              |   |  |
| <i>Cleanliness/Sterility</i> | <ul style="list-style-type: none"> <li>Undraped, mother touches perineum, baby at will</li> </ul>                                       |  |
|                              | <ul style="list-style-type: none"> <li>Draped, sterile technique</li> </ul>   |  |
|                              |   |  |
| <i>Perineal Care</i>         | <ul style="list-style-type: none"> <li>Episiotomy avoided with support, massage, hot compresses</li> </ul>                              |  |
|                              | <ul style="list-style-type: none"> <li>Anesthesia, episiotomy, stitches</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Ice packs after birth</li> </ul>   |  |
|                              |   |  |
| <i>Ambiance</i>              | <ul style="list-style-type: none"> <li>Lights dimmed, music if desired, quiet, respectful ambiance</li> </ul>                           |  |
|                              | <ul style="list-style-type: none"> <li>Standard lighting, noise level</li> </ul>  |  |
|                              | <ul style="list-style-type: none"> <li>Delivery/operating room</li> </ul>   |  |

|                             |  |  |
|-----------------------------|--|--|
|                             |  |  |
| <b>After Birth</b>          |  |  |
| <i>Delivery of Placenta</i> | <ul style="list-style-type: none"> <li>• Spontaneous</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Encouraged with nipple stimulation, baby nuzzling, sucking</li> </ul>                         |  |
|                             | <ul style="list-style-type: none"> <li>• Hastened by massage of fundus by doctor/midwife</li> </ul>                                    |  |
|                             | <ul style="list-style-type: none"> <li>• Pitocin</li> </ul>  |  |
|                             |  |  |
| <i>Cord Cutting</i>         | <ul style="list-style-type: none"> <li>• Clamp and cut after it stops pulsating</li> </ul>   |  |
|                             | <ul style="list-style-type: none"> <li>• Partner cuts cord</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Clamp and cut immediately, if medically indicated</li> </ul>                                  |  |
|                             |  |  |
| <i>Airway</i>               | <ul style="list-style-type: none"> <li>• No suctioning unless necessary</li> </ul>   |  |
|                             | <ul style="list-style-type: none"> <li>• Suctioned with bulb syringe</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Suctioned with DeLee mucus trap</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Meconium present; respiratory therapy to evaluate</li> </ul>                                  |  |
|                             |  |  |
| <i>Warmth</i>               | <ul style="list-style-type: none"> <li>• Baby skin-to-skin with mother, warmed blanket over both, hat for baby</li> </ul>              |  |
|                             | <ul style="list-style-type: none"> <li>• Placed on warming table</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Placed in thermostatically controlled isolette</li> </ul>                                     |  |
|                             |  |  |
| <i>Immediate Care</i>       | <ul style="list-style-type: none"> <li>• Baby given to mother ASAP, nursed as desired, observed in parents' arms</li> </ul>            |  |
|                             | <ul style="list-style-type: none"> <li>• Kept near parents in isolette</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Taken to nursery for observation, weighing, feeding, and routine newborn care</li> </ul>      |  |
|                             |  |  |
| <i>Eye Care</i>             | <ul style="list-style-type: none"> <li>• None, waiver required</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Non-irritating ointment within one hour</li> </ul>  |  |
|                             |  |  |
| <i>First Feedings</i>       | <ul style="list-style-type: none"> <li>• Breastfeeding on demand (of baby), no sugar water, sterile water, pacifiers</li> </ul>        |  |
|                             | <ul style="list-style-type: none"> <li>• Avoid nipple shield</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Water (glucose or sterile) by medicine dropper or bottle given by parents or nurse</li> </ul> |  |
|                             | <ul style="list-style-type: none"> <li>• Formula feeding on demand</li> </ul>  |  |
|                             |  |  |
| <i>Contact with Baby</i>    | <ul style="list-style-type: none"> <li>• As much as parents want; all newborn procedures done in mother's room</li> </ul>              |  |
|                             | <ul style="list-style-type: none"> <li>• Baby to nursery</li> </ul>  |  |
|                             |  |  |
| <i>Circumcision</i>         | <ul style="list-style-type: none"> <li>• None</li> </ul>   |  |
|                             | <ul style="list-style-type: none"> <li>• With parent(s) present to comfort baby</li> </ul>   |  |
|                             | <ul style="list-style-type: none"> <li>• With no anesthesia</li> </ul>   |  |
|                             | <ul style="list-style-type: none"> <li>• With anesthesia</li> </ul>  |  |
|                             | <ul style="list-style-type: none"> <li>• Out-of-hospital circumcision</li> </ul>   |  |
|                             |  |  |

|                                     |   |  |
|-------------------------------------|---|--|
| <i>Discharge of Mother and baby</i> | <ul style="list-style-type: none"> <li>• When desired</li> <li>• Early release; within 6-12 hours of birth, with pediatrician's consent (need to arrange in advance)</li> <li>• 1 or more days after birth (check insurance coverage)</li> <li>• Write down discharge weight of baby</li> </ul>                                   |  |
| <b>THE UNEXPECTED</b>               |   |  |
| <b>Cesarean Birth</b>               |   |  |
| <i>Timing</i>                       | <ul style="list-style-type: none"> <li>• After labor begins (unexpected)</li> <li>• Scheduled before labor begins with adequate assurance of fetal maturity</li> </ul>  |  |
| <i>Incision</i>                     | <ul style="list-style-type: none"> <li>• Low transverse to allow for future VBAC</li> <li>• Double-layer suturing to reduce risks of future problems with placenta</li> </ul>   |  |
| <i>Partner's Presence</i>           | <ul style="list-style-type: none"> <li>• Partner present (some hospitals request advance notification when partner is not the father)</li> <li>• Partner obtains cesarean preparation</li> <li>• Partner not present</li> </ul>   |  |
| <i>Anesthesia</i>                   | <ul style="list-style-type: none"> <li>• Regional anesthesia (spinal or epidural) with little or no premedication</li> <li>• General anesthesia (required in emergency)</li> </ul>  |  |
| <i>Participation</i>                | <ul style="list-style-type: none"> <li>• Mother wears glasses or contacts</li> <li>• Screen lowered at time of delivery</li> <li>• Anesthesiologist or obstetrician explains events as they occur</li> <li>• Mother has contact with baby ASAP</li> <li>• Mother pushes rather than fundal pressure from surgical team</li> </ul> |  |
| <i>Contact with Baby</i>            | <ul style="list-style-type: none"> <li>• Partner holds baby near mother, unlimited access</li> <li>• Breastfeeding ASAP</li> <li>• Sent immediately to nursery or NICU</li> </ul>   |  |
| <i>Hospital Stay</i>                | <ul style="list-style-type: none"> <li>• Mother has cesarean roommate, if any and if possible</li> <li>• Mother on OB floor, not surgical ward</li> </ul>   |  |
| <i>Discharge</i>                    | <ul style="list-style-type: none"> <li>• Minimum two day stay, 3-4 days are average</li> </ul>  |  |
| <b>Premature or Sick Infant</b>     |   |  |
| <i>Contact with Baby</i>            | <ul style="list-style-type: none"> <li>• Parents visit and care for baby as much as possible. Unlimited access preferred</li> <li>• Parents allowed to stay at hospital</li> </ul>  |  |
|                                     |   |  |

|   |  |  |
|---|--|--|
| <i>Feedings</i>                               | <ul style="list-style-type: none"> <li>Breastfeeding as soon as baby is able</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Gavage feedings with breastmilk if possible (mother supplied with breastpump and support network)</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Parents taught to do gavage feedings</li> </ul>   |  |
|   | <ul style="list-style-type: none"> <li>Formula feedings by bottle, dropper, or tube</li> </ul>   |  |
|   |  |  |
| <i>Contact with Appropriate Support Group</i> | <ul style="list-style-type: none"> <li>Request information from staff</li> </ul>   |  |
|   |  |  |
| <b>Death of Baby</b>                          |  |  |
| <i>Contact with Baby</i>                      | <ul style="list-style-type: none"> <li>Unlimited contact; called if baby in critical condition</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Allowed to hold baby while dying if possible</li> </ul>   |  |
|   | <ul style="list-style-type: none"> <li>Unlimited contact after death</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Photographs take of baby, lock of hair, hand/foot print</li> </ul>  |  |
|   |  |  |
| <i>Support</i>                                | <ul style="list-style-type: none"> <li>Parents' support persons allowed to be with parents</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Hospital staff (nurse, social worker, ombudsman available to explain options, legal rights)</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Information on support groups supplied</li> </ul>   |  |
|   | <ul style="list-style-type: none"> <li>Phone/hospital visit by representative of above</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Parents not rushed into decisions (this sometimes occurs due to discomfort with the situation by those involved)</li> </ul>   |  |
|   | <ul style="list-style-type: none"> <li>Privacy, if desired, ensured</li> </ul>   |  |
|   |  |  |
| <b>Unexpected Financial Burden</b>            |  |  |
| <i>Assistance</i>                             | <ul style="list-style-type: none"> <li>Request information on organizations, groups, state programs, federal programs, etc. that offer financial support/assistance to people in similar circumstances (eg, premature infant requiring prolonged hospitalization)</li> </ul> |  |
|   | <ul style="list-style-type: none"> <li>Arrange meeting with hospital accounting department and patient advocate in order to make manageable financial arrangements</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>If insured, request help from insurer in understanding covered and non-covered expenses</li> </ul>  |  |
|   |  |  |
| <b>Other</b>                                  |  |  |
| <i>Communication</i>                          | <ul style="list-style-type: none"> <li>Parents desire to make informed decisions and choices whenever possible</li> </ul>  |  |
|   | <ul style="list-style-type: none"> <li>Parents desire cooperation and to cooperate in order that all have the best possible experience</li> </ul>  |  |