



My Birth Plan



Name:

Support person(s):

Doctor or midwife:

This checklist is meant to guide your discussion with your practitioner. Note your preferences and give copies to your caregivers when you arrive at the hospital.

LABOUR

- I plan to use natural pain relief techniques (such as breathing techniques, position changes, labour ball, and/or Jacuzzi/shower).
- I'll decide whether to use pain medication as my labour progresses.
- I'd like to be offered an epidural or other pain medication as soon as possible.
- I'd like to view the birth using a mirror.
- I'd like to touch my baby's head as it crowns.
- Dad or partner would like to be involved in cutting the cord
- I plan to donate my baby's cord blood to a public bank.
- I plan to store my baby's cord blood in a private bank.

My biggest concern or fear about labour and birth is: _____

POSTPARTUM

- I'd like to hold my baby skin-to-skin immediately after delivery.
- I'd like my baby to be dried off before being brought to me.
- I'd like to delay newborn procedures (such as measuring/vitamin K/eyedrops) for time to bond.
- I'd like all procedures and medications provided to be explained to me beforehand.
- I'd like my baby evaluated and bathed in my presence.
- If my baby must be taken from me to receive medical treatment, I'd like _____ to go with him or her.
- If my baby's a boy, I do/do not want him to be circumcised at the hospital I do I don't
- I am planning to stay _____ hours/days in hospital after birth.
- I have a car seat and have been shown how it is installed.

PLEASE list any workshops, prenatal classes or seminars you have attended in preparation for the birth of your baby:

ADDITIONAL INSTRUCTIONS OR COMMENTS: *Please include any cultural or religious traditions you would like to incorporate into the birth of your baby, so it may be discussed prior to birth.*
