

# Birth Plan

Isabelle Anderson, (Izzy)

**OB/Midwife: Christine Taylor, Jennifer Jones** 

Partner: Troy Est Due Date: Oct 5, 2018 Pediatrician: Dr. Jaqueline Hernandez

Thank you all in advance for being fantastic and doing your best for me and my baby. This is my 1st child. I understand things don't always go as planned. I trust you will explain and discuss with us all procedures and potential problems. Thank you for using my preferences to help guide and inform my birthing process.



Please allow 5 minutes to make intervention decisions, if possible. Please wait to offer pain medication, I will request if it is needed. Please offer a warm compress for perineum during pushing.

# Pre-Labor, I would like:

• birthing to start naturally and my water to break on its own

# During Labor, I would like:

• free movement and fetal monitoring only if baby is in distress

### Pain Management

- I'd like to try: bath or shower, massage, different positions, breathing techniques, meditative audio, acupuncture or acupressure, reflexology
- please wait to offer pain medication
- I'm open to: epidural and/or spinal block, pudendal block •
- If I decide to have an epidural I would like the epidural to . wear off while pushing

### During Birth, I would like:

- to feel the urge to push, help knowing when to push, warm compress on perineum during pushing, view birth with mirror, avoid an episiotomy, avoid forceps, avoid vacuum
- my support team would love to catch the baby .

### If Cesarean, I would like:

- a moment alone with someone from my support team to • process prior to surgery
- someone from my support team to remain in the room .
- the surgery explained as it happens .
- to watch the birth
- skin-to-skin contact asap .
- to try breastfeeding asap •
- the baby exposed to vaginal fluids ٠
- . double-layer sutures are preferred

### Support Team:



Troy PARTNER



DOULA

Gabrielle

Katie SIBLING

# After Birth, I would like:

- delayed cord-clamping
- to see my placenta before it is stored
- save my placenta, it will be picked up •
- skin-to-skin asap
- breastfeed ASAP after birth
- myself or someone from my team with baby during any treatments or tests
- please delay all procedures 12–24 hours after birth
- baby to stay in my room at all times •

Please DO NOT give: sugar water, formula, pacifier, vitamin K, eye ointment treatment, Hep B vaccine, bath, circumcision

#### If baby is not doing well. I would like:

- to accompany baby to the NICU or another facility
- to try breastfeeding or to provide pumped milk

### Postpartum, I would like:

sitz baths, limited visitors, ice packs, to wear my own clothes, Depends and/or heavy duty pads, visit with a lactation consultant

Pain Management: stool softener, any pain medicine recommended

#### Other Notes:

Environment Preferences: dim lights, birthing ball, music, aromatherapy, fan, candles, family photos

To prepare for birth I have studied: General Birth Education, Hypnobabies, Hypnobirthing

