## Creating a birth plan

Creating your birth plan, either on your own or with your birth partner or a friend who has had a positive birth experience, is a powerful and practical next step as you prepare to give birth. It will help you clearly define and visualize what you want for you and your baby's birth experience.

You'll find two one-page birth plan documents below - one for a vaginal birth, and one for a c-section birth. These are most valuable before you go into labor. They are great tools to start a conversation between you and your doctor or midwife about the kind of birth you would like, what is important to you as you look forward to having your baby, and what approach you prefer if you decide interventions like induction or caesarean birth are right for you and your baby. The two plans, printed, filled out and brought along to one or two prenatal appointments, serve as prompts to guide conversations with your provider. They're also helpful in guiding conversation with your doula and/or birth partner.

While you should bring your birth plans along with you as you go into labor, and ask your birth partner to share them with your care team and post them near you, it's important to have clear expectations about the plans' limited usefulness during labor. Your birth plans support, but never replace, direct conversation with your care providers. Birth plans are not a prescription or something to expect your birth team to consult during birth. Their purpose is to help everyone get on the same page pre-birth. We can hope the medical team members briefly consult the applicable plan if they are meeting you for the first time while you are in labor, but this may not happen.

We recommend that you hold your plans loosely. Birth is, if nothing else, unpredictable, and it's something to remain flexible about. Plan for your ideal birth so that you can give yourself the best shot at having it, but keep an open and accepting mind about the way your labor and birthing unfolds. You, as the birthing mother, get to take control of the narrative, minute by minute, and it's important to have a go-with-the-flow attitude for how your baby comes into the world.

On the following pages, you'll find a one-page birth plan template and a one-page Caesarean birth plan template to consider. In each section, you can check all options that apply for you, and add preferences that apply under "other" in each section. Use these templates in any way that serves you and your vision for your birth. Each birth plan should be a brief and clear outline that highlights what is most important to you about your birth. We recommend keeping each birth plan to one page in length, so it is easy for your medical team to read and understand quickly and so that you focus on the items that are most important to you.

Our Birth: In case we haven't gotten to know each other before now, this will give you a feel for our hopes, preferences and priorities. We look forward to talking with you personally about these items and more as our birth unfolds. We are so grateful for your expertise and care. I prefer to be called: Mother's Full Name: Besides a healthy baby and mother, my top priority for this birth is: **Environment During Labor Support and Coaching** If I could choose one word to describe the I would like this/these person(s) present in the atmosphere I'd like in the birthing room, it would be: birthing room to support me: My preferences are: Please include the above birth partner(s) in updates about how labor is progressing; they are well-versed Quiet/soft voices in my preferences and communication style. Dim lighting O I'd like a doctor, nurse, or midwife to coach me Minimal conversation through the pushing phase. O Birthing ball and/or other options for movement O I'd prefer quiet support throughout the pushing phase unless I ask for coaching. O I'd like to be offered different positions to labor Photos and/or videos taken by: and/or push in. O I'd like to be offered a mirror to see my baby **Comfort and Relaxation Measures** crowning. O I'd like to be offered perineal massage and Offer me pain management options during labor. lubrication. O Please don't offer me pain management options, Other: I will request it if I need it. O I will use my deep relaxation practice aided by a **Immediate Newborn Care Preferences** quiet room. O Place my baby on my chest for skin-to-skin I would like an Epidural/Regional Analgesia. immediately after birth. Other: O I would like delayed cord clamping (please wait **Intervention Preferences** one to two minutes to clamp and ask me first). O Please allow one hour for me to hold and bond • If induction is necessary, I would like to discuss with my newborn baby before weighing and gentle methods like nipple stimulation before doing any non-emergent newborn care that can't membrane stripping, cervical ripeners or Pitocin. be performed while skin-to-skin. O If I need any procedures such as vacuum, forceps, Other: or episiotomy, please discuss them with me even more thoroughly than informed consent requires. Sometimes it takes extra time for me to really Feeding, Medication and Vaccination Preferences understand and process this type of information. O My feeding plan for my baby is..... Should a cesarean birth be advised, I would like I would like lactation support. to take 5 minutes to discuss the situation privately O I'd like typically administered Vitamin K, with my birth partners (as long as baby is not in Erythromycin ointment, and Hepatitis B vaccine. imminent danger). Should a cesarean birth become necessary, I I'd like to discuss alternatives to typically would like a gentle/family-centered c-section. administered Vitamin K, Erythromycin ointment

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Other:

and/or Hepatitis B vaccine.

Our Caesarean Birth: We are so grateful for your expertise and proficiency performing c-sections. Because this is unfamiliar territory for us and an important and vulnerable time for our family, we would be especially grateful for your patience reviewing our situation, your recommendations and our options, even beyond what informed consent requires. Sometimes it takes extra time for us to really understand and process this type of information. We are grateful for your help creating as gentle and family-centered a birthing experience as possible. We look forward to talking with you personally about these items and more.

| Mother's Full Name:  | I prefer to be called:  |
|--|---|
| Besides a healthy baby and mother, my top priority for this birth is:  |   |
| <b>Before Entering the Operating Room</b>  | Immediate Newborn Care Preferences  |
| If our situation permits, we would like time to:   | My preferences are:   |
| <ul> <li>Meet the medical team who will attend the birth<br/>and allow time to understand the process, ask<br/>questions and review our preferences together.</li> </ul> | <ul> <li>For partner to attend baby at warmer.</li> <li>To limit the newborn assessment to the medically essential only so that mother and baby can be</li> </ul>   |
| O Take a private moment for mother and partner   | together as soon as possible.  O For baby to be skin-to-skin on mother's chest or father's chest. If not possible, for mother or partner to be in physical contact with the baby at all times (including transition to recovery room).                      |
| <ul> <li>We would like mother and partner to enter the OR together if feasible.</li> </ul>   |   |
| • We would like to be accompanied by our doula.  | <ul> <li>If possible, please allow one hour for me to<br/>hold and bond with my newborn baby before<br/>weighing and doing any non-emergent newborn<br/>care that can't be performed while skin-to-skin.</li> </ul>   |
| Other: Other:  |   |
| <b>Environment in the Operating Room</b>   | <ul> <li>For baby, partner, and mother to stay together,<br/>uninterrupted.</li> </ul>  |
| My preferences are:  |   |
| <ul> <li>Medical team to use quiet/soft voices, with<br/>conversation limited to the medically essential.</li> </ul>   | <ul> <li>If baby cannot be in OR, for partner to be with baby at all times and for mother to invite additional support person into OR.</li> <li>Other:</li> </ul>   |
| <ul> <li>Music of our choosing played over speakers, if<br/>possible.</li> </ul>   |   |
| O Photos and/or videos taken by:   | Fooding Medication and Vaccination Dueforence   |
| Other:   | Feeding, Medication and Vaccination Preference  |
|  | O My feeding plan for my baby is  |
| Surgical Birth Preferences   | I would like lactation support as soon as possible.   |
| My preferences are:  | <ul> <li>I'd like typically administered Vitamin K,<br/>Erythromycin ointment, and Hepatitis B vaccine.</li> <li>I'd like to discuss alternatives to typically<br/>administered Vitamin K, Erythromycin ointment<br/>and/or Hepatitis B vaccine.</li> </ul> |
| <ul> <li>For my arms not to be strapped down and for<br/>monitoring devices to be placed on back to allow<br/>for skin-to-skin as soon as possible.</li> </ul>           |   |
| <ul> <li>A clear drape so we can see our baby as soon<br/>as s/he is born; if not possible, please lower the<br/>drape at the time of birth.</li> </ul>                  |   |

## birth practice

O Delayed cord clamping of one to two minutes if

feasible.

Other: