



Birth Plan

Your Birth Plan helps you tell your care team about what you want during your labor and delivery. You can change your mind at any time about anything you include in your Birth Plan. We encourage you to complete your Birth Plan in partnership with your doctor or midwife.

It's very important to remember that we can't know exactly what your labor will be like. Our top priority will always be the health and safety of you and your baby. This means that we can't guarantee all your preferences will be appropriate during your labor. We'll do our best, however, to make sure you have the experience you want.

Basic Information

My preferred name: _____

My pronouns: _____

My partner's name: _____

My partner's pronouns: _____

My doctor or midwife's name: _____

My due date: _____

My baby's sex:

☐ Male ☐ Female ☐ Surprise

My delivery is planned as a:

☐ Vaginal birth ☐ Cesarean birth ☐ VBAC (Vaginal Birth After Cesarean)

I have:

- ☐ Never given birth
- ☐ Given birth through vaginal delivery
- ☐ Given birth through cesarean delivery

Who I Want in the Room with Me During Labor

You are allowed two support persons on (which includes your doula)

Name/Relationship: _____

Name/Relationship: _____

Doula's Name: _____

Health Information

I have:

- ☐ Group B strep
(A bacteria commonly found in the vagina or rectum)
- ☐ RH negative blood type
- ☐ Experienced prior assault or birth trauma
- ☐ A fear of needles
- ☐ The following allergies:

- ☐ Additional health concerns:

- ☐ I would like to discuss my
postpartum mental health needs

My baby's health concerns include:

Environment

I would like:

- ☐ The lights dimmed
- ☐ My music playlist on
- ☐ My essential oils used (I will bring them)
- ☐ My birthing ball used (I will bring this)
- ☐ One of my support persons to take pictures (video recording is not allowed during delivery and you may not take photos of staff without their permission)

Labor Preferences

I would like:

- ☐ To labor at home in the early phase of labor
- ☐ To move around during labor and have my baby's heart rate monitored with a portable monitor
- ☐ To let my labor proceed on its own without any interventions to speed it up, if it is progressing normally
- ☐ To have my IV capped off and drink fluids during labor
- ☐ My providers to ask my consent before administering medications (your provider will always ask your consent before completing cervical checks)

Coping with Pain

I would like to:

- ☐ Labor without any pain medications
- ☐ Use nitrous gas
- ☐ Use IV pain medication
- ☐ Have an epidural
- ☐ Decide when I am in labor
- ☐ Use the following non-medication approaches:



Birth

I would like to:

- ☐ Choose the position I am in during labor.

The positions I want to try are:

- ☐ Feel my baby's head crown
- ☐ Use a mirror to see my baby being born

An episiotomy is a small cut made in the tissue between the vaginal opening and the anus.

My wishes for episiotomy are:

- ☐ Avoid an episiotomy unless it is medically necessary
- ☐ Have an episiotomy to avoid tearing
- ☐ Try perineal massage, warm compresses, and positioning before considering episiotomy

If Cesarean is Necessary

Our top priority is for you to have a safe and healthy delivery. When a cesarean birth is planned, we will follow your wishes as much as it is safe to do so. In the case of an emergency, we may not have time to discuss your preferences. We will do our best to engage you in the decision-making process, but may need to act quickly in the interest of your and your baby's health and safety.

In the event of a cesarean birth, I would like:

- ☐ To remain conscious if possible (avoid sedation)
- ☐ The drape to remain in place
- ☐ The drape dropped so I can see my baby
- ☐ The surgery explained as it happens
- ☐ Skin-to-skin contact with my baby as soon as it is safe to do so
- ☐ My baby swaddled and handed to my partner as soon as it is safe to do so
- ☐ My music playlist on, if possible

After Birth

I would like my baby:

- ☐ Immediately placed on my chest skin-to-skin
- ☐ Placed on my partner's chest as soon as possible, if I am unable to do skin-to-skin myself
- ☐ Placed on the warmer and then handed to me swaddled as soon as possible
- ☐ Placed on the warmer and then handed to my partner swaddled as soon as possible

I would like the sex of my baby announced by:

- ☐ A member of my care team
- ☐ Myself
- ☐ My partner

The umbilical cord:

- ☐ I am planning to use umbilical cord blood banking
- ☐ I will not use umbilical cord blood banking

After I deliver the placenta, I would like to:

- ☐ See the placenta
- ☐ Keep the placenta
- ☐ I do not wish to see or keep the placenta

Please note: We always delay cord clamping if it is safe to do so.



Newborn Care

Feeding

- ☐ I plan to breastfeed only
- ☐ I plan to use formula only
- ☐ I plan to breastfeed and use formula
- ☐ I am not sure yet

Bathing

- ☐ I want my baby to have their first bath at home
- ☐ I want my baby to have a bath before we go home, with me or my partner present
- ☐ My baby can be bathed without me or my partner present

Rooming

- ☐ I want my baby in the room with me at all times (this is recommended)
- ☐ My baby can be in the nursery at times, as long as me or my partner is present
- ☐ My baby can be in the nursery without me or my partner

NY State required Vitamin K shot and Erythromycin eye ointment:

- ☐ I would like my baby to receive these while on my chest after birth
- ☐ I would like my baby to receive these while on the warmer after birth

If I have a boy, I would like him:

- ☐ Circumcised before we go home
- ☐ Not circumcised
- ☐ I am still deciding

Some babies may require closer monitoring, due to either previously known or unforeseen circumstances. In these cases, newborn care options may differ. Please speak with your doctor or midwife if you know your baby will require special care after birth.

Did You Know?

All of our nurses are trained to support breastfeeding.

All of our parents are seen by a lactation consultant either the day of baby's birth, or the next day.

We recommend waiting 24 hours before baby's first bath, unless they need it sooner to prevent infection.

Your entire care team is here to support you!

We will always keep you updated on how you and baby are doing. We are here to answer all of your questions.

My Overall Goals

Please share with us any goals, concerns, or religious or cultural practices you'd like us to know about as we prepare for your labor and delivery.

Questions I Want to Ask My Doctor or Midwife
