

Midwifery at "The Group"

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Birth Preparation

You may find it helpful to take some time and express your thoughts and desires regarding your upcoming birth. This will allow us to discuss it with you ahead of time and we can share it with the hospital staff ahead of time too. Birth preparation is an expression of your wishes for your birth. You may change your mind at any time, just as the circumstances of your labor may unexpectedly change and cause you to make additional decisions with the help of your midwife, physician or labor nurse.

Please answer the questions that you feel are appropriate for you:

Name of Mother-to-be and partner/support person:

1) Labor:

I agree to the recommended IV saline lock ("capped IV")

I request no IV unless it is medically necessary.

Genesis is a teaching hospital and occasionally there are students working with us.

I'm happy to work with- any student Midwifery student
 Nursing student Family Practice Resident MD No students

I would like to wear: a hospital gown my own clothing

2) Pain relief:

I'm uncertain what I will want and will wait and see what I need at the time.

I strongly desire a drug free birth. (Only offer medication if I ask)

I would like the "big tub" room to help facilitate this.

I am planning IV pain medication when I am in active labor.

I am planning on an epidural when I am in active labor.

Other

comments- _____

3) Birth:

The following people are invited to witness my birth (no more than 3)

I would like _____ to cut the cord.

_____ I wish to see the baby's head (in a mirror) as it crowns.

_____ I wish to touch the baby's head as it crowns.

_____ I wish for my partner _____ to help catch the baby. (if appropriate)

_____ I have made special arrangements to store/donate the cord blood.
(you must bring the cord blood collection kit with you in labor)

Other comments-

Immediately after birth, I would like my baby placed:

_____ onto a warm towel on my abdomen/chest

_____ directly skin to skin on my chest.

_____ handed directly to the nurse first. (This will always be done if immediate medical treatment is necessary.)

4) Feeding:

_____ I plan to breastfeed my baby.

_____ Please assist me with nursing as soon as possible after the birth.

_____ Please NO supplements to my baby without my permission.

_____ Please NO pacifiers without my permission.

_____ I plan to bottle feed my baby.

5) Baby procedures:

Antibiotic eye ointment: (Given to help prevent infection from the birth canal.)

_____ I would like the treatment given.

_____ I would like the treatment, but want it delayed for 1 hour after birth.

_____ I do NOT want my baby to have the standard eye ointment. (discuss with

baby's provider and sign waiver)

Vitamin K: (One time shot of vitamin K to help the baby's blood clot and help prevent dangerous bleeding on the brain.)

_____ I would like the recommended vitamin K shot to be given.

_____ I would like the treatment, but want it delayed for 1 hour after birth.

_____ I do NOT want my baby to have the recommended vitamin K shot.

(discus

with baby's provider and sign waiver)

Hepatitis B vaccine: (The first in a series of three Hepatitis vaccinations recommended in kids)

_____ I would like the first Hepatitis B vaccine given prior to discharge as usual.

_____ I would like to delay the first Hepatitis B vaccine until a later date.

Circumcision: (The optional removal of foreskin of the penis)

_____ We do NOT plan to circumcise our baby.

_____ We would like our male baby to be circumcised before discharge. (must get _____ Vitamin K)

Other comments- _____

6) Discharge timing:

_____ I am planning the usual discharge timing (2 days - vaginal birth, 3 days - c-section)

_____ I would like early discharge - 24 hours after delivery (discuss with baby's _____ provider)

7) C-section:

_____ I would like _____ to be back with me in the operating room.

_____ It is okay if family members see/hold our baby in the recovery room before I _____ do.

_____ I would like only my partner to see/hold our baby in the recovery room.

What was the best &/or worst thing about your previous labor and birth? Or other comments.
