Birth Preferences

Parents:

Doula:

GBS Status:

Blood Type:

Current Medications:

Mother’s Allergies:

Doctor:

*We’re the*  *family, and we’re so happy to be birthing at*  *, and so glad that you are helping us meet our little baby.*

 *Thank you for all that you do!*

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| **Environment** *Please help us keep the room restful by:* - closing the door; - dimming the lights; - minimizing noise.  | **Pain Management***Please help us remember to try:* - walking or slow dancing; - using the shower or tub; - using birth ball or massage. *Unless medically necessary, we’d prefer:* - intermittent external fetal monitoring;- to avoid IV fluids for as long as possible (using a hep-lock between Penicillin doses) to maintain free movement, nourishment and hydration by mouth; - to wait until mother asks for: pain medication, pitocin, or to have bag of waters broken manually  - to work to keep mother’s perineum intact |
| **In Case of Emergency Cesarean** *Please help us:* - ensure father is present; - attempt breastfeeding as soon as possible and not to have sleep inducing medicine if possible;- have father stay with baby if separation from mother is necessary, encouraging skin to skin contact with father. | **Newborn Care** *Unless Medically necessary, we’d prefer:* - delayed cord clamping (until after pulsing stops);- delayed administration of vitamin K and eye drops for one hour;- infant placed skin to skin on mother’s abdomen for initial newborn exam and to encourage early breastfeeding;- to avoid pulling on the cord to aid placenta delivery;- father and baby to room in with mother;- baby to not be bathed, offered any formula, sugar water, or pacifiers;- placing baby on mother’s chest with blankets if warming baby is needed.We’d also like to see a lactation consultant before leaving the hospital. |