# My Choices for Labor and Birth

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Starts

Created by:



## Getting Ready for Your Baby's Arrival

#### How to use this planner:

You have many choices for your baby's birth. This planner can help you make choices that are right for you. **Please bring this planner to your hospital or birth center to be reviewed by your care team.** 

#### Start by getting informed:

- Write down your thoughts and choices in the "My Journal" section (page 2).
- Think about the questions under "About My Labor and Birth" (pages 4-5).
- See "**My Checklist During Labor**" and mark your choices (pages 6-13).

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Get familiar with "Words to Know" about giving birth (pages 14-15).

This will help you get ready to talk with your Doctor, midwife, or other Provider. Be sure to bring this planner on your next visit to your Provider. You can both sign it – so you'll have a plan that shows your choices for labor and birth.

## My Journal

#### Date:

What would make my childbirth great?

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I am grateful for...

#### Positive thoughts:

## About Me

#### Go ahead, fill this out...

My name

My date of birth

My due date

My Provider

My baby's Doctor (pediatrician)

My labor support team (can include a support person, friends, family members, or doula who will be present)

### About My Labor and Birth

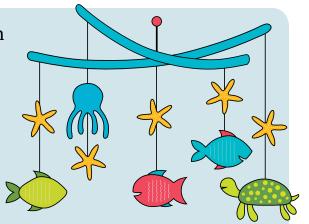
#### Some things to think about...

Some of your choices before and during childbirth may affect your risk of having a C-section. These choices are best made with the help of your Provider during prenatal visits, well before the time of birth. Here are some common choices to think about and discuss:

- O you want to wait for labor to begin on its own or do you want to be induced?
- Do you want to be admitted to the hospital early or wait until you are in active labor? Being admitted in active labor improves your chances of having a vaginal birth.
- How do you want your baby's heart rate to be monitored during labor? If you are a healthy woman with no problems during pregnancy, monitoring your baby's heart rate the whole time you are in labor (continuously) may make it more likely to have a C-section.
- Do you want to have labor support by a doula or a birth coach? This support improves your chances of having a vaginal birth.
- How do you want to manage your pain?

- How often do you want to be checked by your Provider to see if the baby is close to coming out?
- Do you want to eat and drink to keep up your strength during labor?
- Oo you want to move around and change positions during labor?
- How do you want to "push" at the time of birth? Are there any special customs that should happen right after your baby is born or before you go home?

Most healthy women will not need any special care or procedures during labor. But, women with certain health problems may need procedures,



such as monitoring the baby's heart rate or induction of labor, to have a safe and healthy birth. Your Provider can talk with you about the choices you may have during labor and birth, and their benefits or risks. This is a chance to share your values and preferences and make decisions together, based on your needs.

## My Checklist for Labor

Check the box to show your choices

#### My hospital or birth center room:

- ☐ I would like a sign posted on the door of my room to limit the number of guests while I am in labor
- □ I would like to have the lights dimmed during labor
- I plan to bring a device to play music
- ☐ I plan to bring in scented oils
- I plan to bring in a focal point to help me during labor and birth

#### **Eating and drinking:**

☐ I would like to drink to stay hydrated during labor – I would like to avoid fluids in an IV tube unless it is needed

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- I do not mind getting fluids through an IV tube during labor
- If it is safe for me, I would like to eat lightly during labor

#### My labor:

☐ If it is safe, I prefer to labor at home during the early part of labor, and be admitted to the hospital when I am in active labor



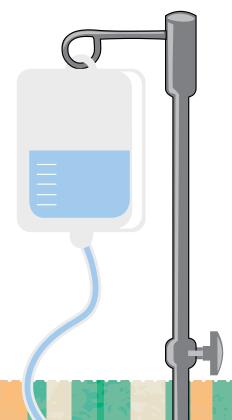
- ☐ I would like to move around while I am in labor (walking, standing, sitting, kneeling, using a birth ball, etc.), if safe and possible
- ☐ I prefer to move around or change positions to speed up my labor progress before trying medications
- ☐ If my labor is moving normally, I would like to be patient and labor on my own before trying medicines to speed it up
- ☐ I would like to wait for the amniotic membrane to break on its own if my Provider needs to break my water, please discuss this with me first
- ☐ If I need an IV during labor, I would like to have it placed so that I am free to move around during labor

#### Managing my pain:

- ☐ I would like to use a shower or tub for pain relief if available
- I do not want pain medicine or an epidural during my labor



- Please do not offer me any pain medicine if I decide to use pain medicine or an epidural, I will ask for it
- ☐ I plan to use pain medicine through my IV during labor and birth
- ☐ I plan to use an epidural during labor and birth
- I am thinking about using IV pain medicine and/or having an epidural, but I will decide once I am in labor



#### Monitoring my baby:

- ☐ I would like to have my baby monitored only when needed during my labor (not continuously)
- ☐ I would like to have my baby monitored the whole time I am in labor (continuously) – I understand that this may limit my movement and keep me in bed during labor
- ☐ If my baby needs to be monitored during the whole time I am in labor (continuously), I prefer a portable monitor (if available and if I can move freely)

#### Exams during my labor:

- □ I prefer to have as few vaginal exams as possible (vaginal exams help a Provider know if my labor is moving along)
- If it is safe, and my bag of water is not broken,
  I prefer to have vaginal exams regularly so I know how my labor is moving

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#### My baby's birth:

- ☐ I would like to push in a position that I choose (squatting, kneeling, lying on my side, lying on my back, etc.)
- I would like to avoid an episiotomy if I can
- ☐ I would like to use a mirror to view the birth of my baby, if available
- ☐ I would like this support person to cut my baby's umbilical cord:\_\_\_\_\_\_
- ☐ I would like my baby placed on my chest right after birth
- ☐ If safe and possible, I would like my Provider to wait 30 to 60 seconds before cutting the umbilical cord (waiting can protect babies from anemia after birth)
- ☐ I am planning to keep my baby's cord blood in a bank (cord blood banking is a special procedure that I discussed with my Provider during prenatal care)
- ☐ I would like to take my placenta home with me

Continued on next page...

If a cesarean section (C-section) is needed, your care team will consider your preferences as much as they can throughout your stay. Sometimes, emergencies call for a quick conversation about the risks and benefits of a C-section. The care team will want you to take part in the decision to have a C-section.

#### My cesarean birth:

- ☐ I would like my support person to stay with me during my C-section
- ☐ I would like to bring this second support person with me into the operating room if possible:
- □ I would like to ask my Provider to lower the screen used during my C-section so that I can watch the birth of my baby
- □ I would like to have an arm left free so that I can touch my baby if my Provider agrees that it is safe and possible
- □ I would like this support person to cut my baby's umbilical cord:
- ☐ I would like my baby placed on my chest in the operating room if we are both doing well

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☐ I would like to hold my baby on my chest during the recovery period

#### Care for my baby:

- ☐ I would like all procedures and medicines for my baby explained to me before they happen or are given
- ☐ If my baby needs to leave my side for any reason, I would like this support person to stay with them:
- □ I would like to be present for my baby's first bath
- □ I plan to only breastfeed my baby
- ☐ I may have questions about breastfeeding or need help getting started
- If my baby needs formula for a medical reason, I would like to be told before it is given
- Even if my baby needs formula for a short time, I would like help from a breastfeeding expert to learn how to pump my own milk
- ☐ If I have a boy, I plan to have him circumcised (this may be done after you and your baby go home from the hospital)





#### **Other practices:**

What is most important to me during labor and birth? Are there any religious or cultural customs I would like to happen during the birth? Please describe:

#### Signatures:

I have talked about and shared my labor and birth choices with my Provider during prenatal visits, and we both understand it. I know that my choices and wishes may not be followed as written and, if medical needs arise, these may need to change to have a safe and healthy birth for my baby and me.

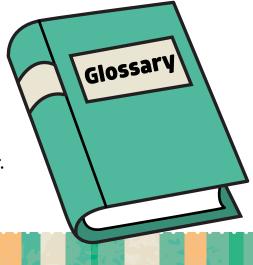
Provider's signature	Date
My signature	Date

#### Words to Know

- A doula is a trained, non-medical person who helps and supports a woman before, during, and after birth. A doula may also be called a birth coach.
- A Provider is a medical professional. A Provider that has been trained to care for pregnant women could be an obstetrician Doctor (OB), a nurse practitioner (NP), or a certified nurse midwife (CNM).
- A focal point is an item that you can bring with you to look at (focus on) during labor. This item can help you take your mind off the pain and give you confidence. Examples are: a favorite picture, an important object, or a plant.

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- A C-section or cesarean birth is a surgery that may be needed to deliver your baby through your abdomen.
- An induction is when medicines are used to start your labor. Labor may be started (induced) when there is a medical need for your birth to happen sooner.



A birth center is one more option of where to give birth. Healthy women may give birth at a birth center instead of at a hospital. Often, CNMs are the Providers in birth centers.

An IV is a tube that may be placed by your Provider into a vein in your arm or hand to give you fluids and medicines during your labor.

The amniotic membrane is the bag of water that surrounds your baby inside your uterus.

An epidural is a device that is placed by a Provider in the lower back and is used to give pain medicine during labor and birth. It can also be used for pain control during a C-section.

 An episiotomy is a procedure in which a Provider makes a cut at the vagina to allow birth to happen faster and is most often done in an emergency. An episiotomy can increase pain and healing time after birth.

The umbilical cord connects the baby (from their belly button) to the placenta. The cord is cut after birth.

## Notes




Inland Empire Health Plan

1-800-440-IEHP (4347) 1-800-718-4347 TTY www.iehp.org

## Destination Health

Adapted from "Birth Preferences" by the California Maternal Quality Care Collaborative (CMQCC)

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