

My Choices for Labor and Birth

Created by:



Get Ready for Your Baby's Arrival

You have many choices for your baby's birth. Use this planner to make labor and birth choices that are right for you. **Please bring this to your hospital or birth center for your care team to review.**

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

This helps 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?

I'm grateful for...

Positive thoughts:

About Me

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 cesarean section (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:

- Do 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're 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're a healthy woman with no problems during pregnancy, monitoring your baby's heart rate the whole time you're in labor (continuously) may make it more likely to have a C-section.



- Do you want to have labor support by a doula or birth coach? This support improves your chances of having a vaginal birth.
- How do you want to manage your pain?

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- 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?
- Do 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 won't 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 have during labor and birth, and their benefits or risks. This is a chance to share your values and preferences and make decisions together.

My Checklist for Labor

☒ Check the box to show your choices

My hospital or birth center room:

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

Eating and drinking:

- ☐ I want to drink to stay hydrated during labor – I want to avoid fluids in an IV tube unless it's needed.
- ☐ I don't mind getting fluids through an IV tube during labor.
- ☐ If it's safe for me, I want to eat lightly during labor.



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My labor:

- ☐ If it's safe, I prefer to labor at home during the early part of labor, and be admitted to the hospital when I'm in active labor.
- ☐ I want to move around while I'm 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 want to be patient and labor on my own before trying medicines to speed it up.
- ☐ I want 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 want to have it placed so that I'm free to move around during labor.



Managing my pain:

- ☐ I want to use a shower or tub for pain relief, if available.
- ☐ I don't want pain medicine or an epidural during my labor.
- ☐ Please don't offer me any pain medicine – if I decide to use pain medicine or an epidural, I'll 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'm thinking about using IV pain medicine and/or having an epidural, but I'll decide once I'm in labor.

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Monitoring my baby:

- ☐ I want my baby monitored only when needed during my labor (not continuously).
- ☐ I want my baby monitored the whole time I'm 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'm 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's safe, and my bag of water isn't 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 want to push in a position that I choose (squatting, kneeling, lying on my side, lying on my back, etc.).
- ☐ I want to avoid an episiotomy if I can.
- ☐ I want to use a mirror to view the birth of my baby, if available.
- ☐ I want this support person to cut my baby's umbilical cord: _____
- ☐ I want my baby placed on my chest right after birth.
- ☐ If safe and possible, I want my provider to wait 30 to 60 seconds before cutting the umbilical cord (waiting can protect babies from anemia after birth).
- ☐ I'm 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 want to take my placenta home.



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If a 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 want my support person to stay with me during my C-section.
- ☐ I want to bring this second support person with me into the operating room if possible:

- ☐ I want to ask my provider to lower the screen used during my C-section so that I can watch the birth of my baby.
- ☐ I want an arm left free so I can touch my baby if my provider agrees that it's safe and possible.
- ☐ I want this support person to cut my baby's umbilical cord:

- ☐ I want my baby placed on my chest in the operating room if we're both doing well.
- ☐ I want to hold my baby on my chest during the recovery period.



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Care for my baby:

- ☐ I want 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 want this support person to stay with them:
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- ☐ I want 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 want to be told before it's given.
 - ☐ Even if my baby needs formula for a short time, I want 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).

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Other practices:

What’s most important to me during labor and birth? Are there any religious or cultural customs I want to happen during the birth? Please describe:

Signatures:

I’ve 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
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My signature	Date
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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**. Doula services are covered by IEHP. Call Member Services to request one.
- A **provider** is a medical professional. A provider that has been trained to care for pregnant women could be an obstetrician doctor (OB), nurse practitioner (NP) or 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.
- 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's a medical need for your birth to happen sooner.



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- A **birth center** is another place to give birth. Healthy women may give birth at a birth center instead of at a hospital. Midwives are often the providers in birth centers.
- An **IV** is a tube that may be placed into a vein in your arm or hand to give you fluids and medicines during labor.
- The **amniotic membrane** is the bag of water that surrounds your baby inside your uterus.
- An **epidural** is a device that is placed in the lower back and 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

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Adapted from “Birth Preferences”
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Member Services

1-800-440-4347

1-800-718-4347 (TTY)

Monday–Friday, 7am–7pm
Saturday–Sunday, 8am–5pm



Inland Empire Health Plan

iehp.org

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