

# My Birth Plan

(For a normal, full-term delivery)

Name: \_\_\_\_\_

## My plan is to:

- 1. Have my labor start and stop without drugs, unless medically required
- 2. Have my chosen support people stay with me
- 3. Drink clear liquids and eat light foods during early labor
- 4. Move, change positions, take a shower, have a massage and walk, as much as possible during labor
- 5. Have a Heparin Lock versus a continuous drip IV for quick access in case of an emergency
- 6. Hold my baby skin-to-skin immediately after birth
- 7. Have my baby's tests performed while in contact with me so my baby is not taken from me until after he/she has breastfed
- 8. Have 24-hour rooming in
- 9. Receive help and education to breastfeed successfully
- 10. Have my baby brought to me if for some reason he/she is not in my room and is giving hunger cues, such as sucking hands or making sucking sounds, moving the head towards a person or, in very sleepy babies, eye movements under the eyelids before he/she is crying
- 11. Get an appointment for a health checkup for my baby upon discharge and be given the names of lactation experts, in case I need help with breastfeeding
- 12. Be given instruction on the use of an electric breast pump if my baby is unable to breastfeed or is separated from me due to a medical condition within 6 hours after delivery

## I do not want:

- A. My bag of waters broken, or to have an episiotomy or other surgery done unless medically necessary
- B. My baby given a pacifier, bottles, water or formula without my consent and the medical order of his/her doctor

\_\_\_\_\_  
*Signature of the patient*

\_\_\_\_\_  
*Date signed*

*Copies for doctor, hospital, clinic and patient*