

BUILDING YOUR *Hospital Birth Plan*

When creating your birth plan for birthing at the hospital, it is good to know that in this area, most of the things families desire are standard practice. Babies are always put skin-to-skin after a vaginal delivery, breastfeeding is strongly encouraged and babies are only sent to a nursery if they need extra monitoring. We recommend treating your birth plan as a “get to know our family” document to introduce yourself and your unique wishes to the hospital staff. Have a draft ready to bring to a prenatal visit and go over it with your care provider. If there are things that they won't honor in your plan, it's never too late to discuss finding a care provider who will fit your needs. This is especially true if you want a VBAC (vaginal birth after cesarean). Remember, you hire them!

Format:

- Titling it “Birth Wishes” or something similar is a good way to begin the positive relationship with the hospital and also reframe your own mind that birth cannot be planned. We can state our wishes and intents, but the flow of your labor will depend on your baby and your body!
- I recommend creating a birth plan that reads like a bullet point list of short blurbs. This will be read by nurses at each shift change, so keep it simple 😊
- Be gracious in your wording, you get more bees with honey than vinegar! Proofread it and keep it to one page if possible!

Things to include:

- Who will be there? Mom, Partner, Doula, Grandma? Sister? Birth Photographer? What are your wishes for family members and friends who pop in while you're in labor?
- Who's inside you? Tell them about your baby! Is this your first baby? What other birth experiences have you had? A quick note about your family and how your previous deliveries went can help the nurses support you best.
- What are your wishes for pain medication? Do you want them to ban the word “epidural” from the room or do you want them to let you know when that option is available for you? Do you have a code word that you will use if you decide to have medication? Though the information will be in your chart, you can remind them here of any allergies or reactions you have to medications.
- Regarding interventions and deviations in normal birth, how do you want information presented to you? Would you like time alone to discuss options? Do you want new information presented to partner, to mom or to both? If you have decided to refuse standard hospital procedures such as a hep-lock port, postpartum Pitocin or continuous fetal monitoring, list those out and mention that it has been discussed with your care provider.
- Do you have goals for the “vibe” of the birth room or have you practiced a certain style of labor coping such as hypnosis or are you bringing in a rental tub to use in labor? Let them know anything unique to your labor. Things like calm voices, music and low lights are pretty standard, but feel free to mention it anyway.
- Are there any special requests you have for the birth of the baby? Do you want to delay the cord clamping? Are you banking or donating the cord blood? Are you keeping the placenta? Who wants to catch the baby? Does someone want to cut the cord? How long would you like to have your baby with you before they are taken to be cleaned and examined?
- Do you have a plan for the immediate baby care? Would you like to delay the first bath? Do you want visitors at the hospital or should they wait until you are home? What do you want that time of bonding to look like?
- In the event of a surgical birth, what are your wishes? Do you want more than one person to accompany you to the OR? What would your wishes be for the baby after the birth? There is not usually a lot of leeway here, but it is good to mention it anyways.

BUILDING YOUR *Planned Cesarean Birth Plan*

These are the four categories you want to consider when creating your birth plan:

For Pre-Birth:

- Who do I want present with me during birth in the OR? Partner? Doula? Other family member or professional?
- What kind of environment would I prefer in my room before surgery?
- What kind of environment would I prefer in the OR (talkative or quiet)?
- Would it help to be introduced to the team of professionals in the OR?

For During Birth:

- How involved/hands on do I want to be in the process of my baby's birth?
- Where do I want the first couple of hours of my baby's life to be spent?
- Can you have a mirror to watch the birth? Can you have a clear drape?
- Can you have the baby placed on you in the OR while the surgery is finishing?
- Is photo taking permitted?
- Can they do delayed cord clamping?
- Are you banking or donating the cord blood?
- Are you keeping or encapsulating your placenta? If so, make sure it is not sent to pathology.
- When can you begin breastfeeding (if desired)? During the procedure? Or after in recovery?
- Do you want the team to explain each step as they are doing the procedure?

For Postpartum Recovery:

- What postpartum pain management options are available?
- When can I take a shower or bathe?
- What are the physical requirements of the birthing parent to be able to leave the hospital?

For Baby Care:

- Who will go with the baby if they need special care?
- Do you want to delay the first bath?
- Do you want visitors while you're in the hospital?
- Eye ointment for baby? Vitamin k shot?

Things to include:

- Who's inside you? Tell them about your baby! Is this your first baby? What other birth experiences have you had? A quick note about your family and how your previous deliveries went can help the nurses support you best.
- Make sure to ask your provider any questions you might have about the procedure beforehand.

Things they might not tell you:

- You can still get extremely nauseated and potentially vomit. You can also get the shakes in surgery.
- One of the side effects of the IV medication (fentanyl) is all over itchiness, if you are experiencing this, ask for Benadryl from your nurse.
- You should be able to feel pressure, but NOT pain. If you do - alert your team immediately!!
- Some people feel like they "can't breathe" due to the medications, this is normal.
- You may want some sort of aromatherapy for the smells that can occur during surgery.