Birth Wish List

Birth Parents Name: Support Persons Name:

Partners Name: Physician/Midwife:

The following information includes our preferences for our upcoming labour and delivery. We fully understand that in certain circumstances these wishes may not be possible, but it is our hope that you will assist us in making this the experience we hope for. If you have questions please let us know.

Sincerely,

Yours and your partners name

Labour

- I would prefer to be given full information on risks and benefits of each suggested medical procedure
- Avoid the use of IV unless deemed medically necessary
- To be able to have food & fluids by mouth throughout labour
- Intermittent monitoring is preferred unless continuous fetal monitoring is medically necessary
- I would prefer to not have constant vaginal exams unless medically necessary
- Prefer to have labour unfold on its own unless medical interventions are necessary, such as breaking of the waters, and the use of Pitocin.
- If Pitocin does become necessary, I would prefer to have it increased very slowly.
- Have access to shower or tub for comfort measures.
- If I find labour too intense, I will ask for an epidural on my own, if I feel I'm not coping well

Pushing & Delivery

- I would like to try various positions for pushing
- I would like to have no specific time limit placed on my pushing, as long as baby is doing well.
- I would prefer not to have an episiotomy unless absolutely necessary and would like to know before on is performed
- To have baby placed skin to skin on my chest right after birth
- To have the cord clamping delayed for two minutes
- To have weight, vitamin K and the eye ointment delayed for one hour (the golden hour) to bond with baby.

Cesarean Birth

- If my primary care provider determines that a cesarean delivery is indicated, I would like my partner with me at all times.
- I wish to have an epidural/spinal anesthesia for the surgical delivery
- I would like my hands left free so I can touch my baby afterwards
- To have my baby skin to skin with either myself or my partner after the birth, if possible.

After Baby Is Born

- I will be breastfeeding on demand, exclusively
- I do not wish my baby to be given bottles unless supplementation is required and tube feeding isn't possible.
- Help with breastfeeding on request
- If supplementation is necessary, then I would like help with pumping to supplement with
- If baby must go to the NICU, I would like either myself or my partner to accompany baby
    - To breastfeed or provide pumped milk
    - To hold baby and do skin to skin whenever possible.