

Birthplan for AF

Support People:

- FF, husband
- Kim James, doula (except 8/15 through 8/17)
- KS, sister (8/15 through 8/21 only)

Environment:

To contribute to my relaxation efforts, I'd like to have the lights dim and ask people speak in soft tones, if possible. We'll use the "No Visitor" sign and turn the ringer off the phone.

Controlling Pain:

I'm planning to use relaxation, breathing techniques, whirlpool and movement to cope with pain. At the threshold of my pain tolerance or exhaustion, I may ask for medication (narcotics and/or anesthesia). I'm willing to trade a little pain for the freedom to move around, so I hope not to ask for an epidural right away.

My PMPS number is: +3

Most Important Issues:

- If possible, I'd like to bear down and breathe spontaneously, avoid having people ask me to push to their count and breathe on command.
- I'd like to maintain some level of modesty, if possible.
- We'd like to have the doctor or nurse cut the cord.

Concerns and Fears:

We declined the amnio during pregnancy to reduce the possibility of miscarriage. Now I have anxiety over the health and condition of the baby. **I'd like to request that the caregiver examine the baby immediately after delivery, before bringing him to me with the reassurance that he is perfectly healthy.**

Medical Interventions During Labor:

If induction or augmentation becomes necessary, I'd like to discuss alternatives before pitocin is used.

Cord Blood:

We'll be donating the cord blood to Puget Sound Blood Center.

Cesarean Birth:

- I'd like both Frank and Kim (or Kitren) to be allowed into the operating room if a Cesarean becomes necessary.
- If available, I'd like to use a drape with window, and have the anesthesiologist or obstetrician explain the procedure.
- If the baby needs to go to the NICU or nursery, I'd like Frank to accompany the baby while Kim (or Kitren) stays with me.

Pediatrician:

Dr. JG, MD
ABC Associates
XXX-XXXX
He has privileges at Swedish.

Infant Feeding:

I prefer to breastfeed the baby early in recovery, frequently and on demand, and to avoid pacifier and supplements, if possible.

Rooming In:

We prefer to have the baby with us around the clock.

Circumcision:

We'd like to have the baby circumcised at the hospital using local anesthesia and Frank present during the procedure to comfort the baby.

Educational Needs:

- I'd like to attend the breastfeeding class that Swedish provides.
- I'd like the lactation consultant to observe the baby's latch and give me any advice before I leave the hospital.
- I'd like to learn how to wrap a tight swaddle.

Unexpected Events:

- If it becomes necessary for the baby to be placed in the NICU, please explain our options for visitation and feeding. We'll want to be active participants in his care.
- If the worst happens, please provide a parish nurse.

We appreciate all of the skilled and caring medical professionals that will help bring our baby to us safely!!