Birth Preferences for S & J M, Parents

This is our first baby. It's a little boy and we're naming him Liam. © Our goal is to try to give birth without intervention or medication. We hope to let nature take its course, enjoy the nursing care, and have our son born in as normal & natural a way as possible.

S's priorities for labor and pushing are:

- Freedom to move around, change positions and use the birth ball, yoga mat and tub.
- Keep lights and voices low. Keep conversations soft or outside of the room.
- Follow her instincts during pushing and birth and choose the gravity-enhancing positions that feel best to her, with her doula and midwife's guidance.
- Continuous presence of her support people, J and Kim.
- Limited vaginal exams for medical necessity or upon S's request.
- Eating and drinking to hunger and thirst. (Prefer to self-hydrate and avoid a routine IV.)
- Time to make decisions with her support people present: Please discuss any proposed interventions and procedures using the informed consent model. If time and circumstance allow, S and J prefer trying less invasive methods before moving on to move invasive medical techniques.

Support people:

J, S's husband and baby's father

Kim James, doula

Pain Medication Preference

No narcotics or epidural unless requested by S. If S wants pain medication, she will ask for it.

Pain will be managed using support people, relaxation, breathing, yoga techniques, birthing ball, shower/tub, etc. (Pain Med. Preference -5).

S does not want to be asked to push. She prefers to bear down and breathe spontaneously.

Third Stage of Labor:

Immediate placement of baby skin-to-skin with S at birth.

J, the father, <u>does not</u> want to cut the cord. Please do not offer.

Please avoid routine baby care until at least 60 – 90 minutes after birth or until baby has had a chance to attempt nursing.

Breastfeeding

Infant-led latch within first hour of life

We appreciate your suggestions for successful initiation of breastfeeding!

Newborn Care and Immunizations

Bath, weighing and other immediately newborn care tasks should wait until S has successfully fed baby for the first time.

Hepatitis-B immunization is ok.

No Eye ointment.

<u>Post-partum</u>- Please don't wake mother or baby for routine check-ups unless medically necessary.

Unexpected Events & Complicated Labor

We recognize that labor is unpredictable and we might have to use medical interventions to increase the chances of the healthiest outcome possible for S and Baby Liam.

We appreciate your guidance and giving us the time to ask questions and talk about alternatives, expected benefits and possible risks before acting, whenever possible.

As long as mother and baby are okay, we ask that we are given enough time to try less invasive methods for prolonged or complicated labor before using medical interventions, such as:

- Walking and optimal fetal positioning maneuvers
- Nipple stimulation
- Bath tub

Cesarean Birth- S's priority is to be as mentally aware of the baby's birth as possible.

- No anti-nausea meds or other meds to cause drowsiness or unconsciousness.
- J would like to sit closely with S.
- Contact between baby and S (skin-to-skin) during surgical repair of incisions. If S is not capable of accepting baby, J receives baby after birth. If baby must have immediate care, J will go with baby.
- Postoperative Meds: Please suggest the best choice in terms of keeping S clear-headed as possible.
- S would like to breastfeed baby as soon as possible.

Premature or Sick Baby:

- S and J will care/feed the baby as much as possible. Breastfeed as soon as possible.
- S, J and Kim will all be involved in decision-making re: medications and procedures.

Pediatrician

Dr. ABC XXX Queen Anne Ave. N. Seattle, WA XXXXX