

Birth Plan Worksheet

How to use this:

Go through these items and select your preferences. If you don't know the answer, then you know what you need to spend some time researching. Then you can rewrite your birth plan including the items you have selected. Make it a one page, clear and concise document. Include a short statement at the top about yourself and spouse, any pertinent medical information, your fears, specific wishes, or religious beliefs if desired.

Labor

I would like labor to start spontaneously ☐ okay with induction ☐
IV placed ☐ Saline Lock ☐ No IV ☐
Pain Medication: Do not offer ☐ epidural ☐ other _____ ☐
Pain management tools I would like: water ☐ birth ball ☐ squat bar ☐
Standard cervical checks ☐ cervical checks by request only ☐
Monitoring: Intermittent ☐ continuous ☐ wireless ☐
Atmosphere: dim lights ☐ quiet ☐ minimal interruptions ☐
Any special considerations: _____

Birth

Choose my own position for pushing ☐
Help me off my back for pushing ☐
Land birth ☐ water birth ☐
Mother directed pushing ☐ coached ☐
Perineal massage ☐ warm compress ☐
Mirror available ☐
Catching baby: mom ☐ dad ☐ provider ☐

Unexpected Cesarean

Handle baby gently ☐
Clear drape ☐ regular ☐
Immediate skin to skin ☐
Quiet and respectful in the OR ☐
Someone stay by mom at all times ☐
Describe what's happening during surgery and newborn care to mom ☐

BRAINN Acronym for decision making

B: Benefits
R: Risks
A: Alternatives
I: Intuition
N: What if we do nothing?
N: What happens next?

Immediate Postpartum/Newborn

Do not wipe vernix off baby/no bath ☐
Breastfeed ☐ formula feed ☐
Delay cord clamping until done pulsing or white ☐
Immediate skin to skin ☐
Delay newborn procedures until after golden hour ☐
No routine pitocin after birth ☐
Newborn procedures: Vit K ☐ HepB ☐ Erythromycin ☐
Take placenta ☐

High Plains Birth Services