My birth preferences

Name: _____ **Doctor or midwife:** _____

Attendant(s): _____

Use this checklist to guide your discussion with your practitioner. Note your preferences and give copies to your caregivers when you arrive at the hospital.

LABOR

- ☐ I'd like to have my labor photographed or filmed.
- ☐ I'd like to move around freely during labor.
- ☐ I'd like intermittent or wireless fetal monitoring.
- ☐ If I need an IV, I prefer a saline or heparin lock.
- ☐ I'd prefer to let my water break naturally.
- ☐ I'd like to use labor props, such as:

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- ☐ Please don't offer me any pain medication. I plan to use natural pain relief techniques.
- ☐ I'll decide whether to use pain medication as my labor progresses.
- ☐ I'd like to be offered an epidural or other pain medication as soon as possible.
- ☐ I'd like to be allowed to push when and how I feel I should.
- ☐ I'd like to be coached on when to push and for how long.
- ☐ I'd like to choose the position I deliver in.
- ☐ I'd like to view my baby's birth using a mirror.
- ☐ I'd like to touch my baby's head as it crowns.
- ☐ If I have a c-section, I'd like to have the drape lowered so I can view the birth.

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AFTER DELIVERY

- ☐ I'd like to hold my baby skin-to-skin immediately after delivery.
- ☐ I'd like my baby to be dried off before being brought to me.
- ☐ I'd like to delay clamping and cutting the umbilical cord.
- ☐ I'd like my partner or attendant to cut the umbilical cord.
- ☐ I plan to donate my baby's cord blood to a public bank.
- ☐ I plan to store my baby's cord blood in a private bank.
- ☐ I'm not banking my baby's cord blood.
- ☐ I'd like to delay newborn procedures such as bathing and measuring for the first hour to give me a chance to feed and bond with my baby.
- ☐ I'd like all procedures done and all medications given to my baby to be explained to me beforehand.
- ☐ I'd like my baby evaluated and bathed in my presence.
- ☐ If my baby has to be taken from me for medical treatment, I'd like my partner or attendant to go along.
- ☐ I plan to exclusively breastfeed my baby while in the hospital or birth center.
- ☐ I'd like to meet with a lactation consultant for breastfeeding guidance.
- ☐ I plan to feed my baby formula.
- ☐ I'd like to be consulted before my baby is offered a bottle or a pacifier.
- ☐ If my baby's a boy, I want him to be circumcised at the hospital.

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