

Birth Plan Template

A useful template to create your own truly effective birth plan.

Preferred Names

Use this space to write the names or language you would like the staff to use when talking with you or about your baby. List punctuation for any unusual or difficult names. Provide a list of everyone who is welcome with you during your birth.

Pertinent Health Information

Midwife/Doctor:

Baby's Doctor:

Allergies:

History: This is where I would let them know about any specific medical concerns, past experiences, or health history that affect you or your feelings. If anyone who will be with you has special needs or is nervous about seeing blood or fainting you can include that information here or in the next section.

Personal Background, Preferences & Cultural, Spiritual, or Family Traditions

Use this space to let your birth team know about any special rules or rituals you plan to follow during your birth. Also include details about your feelings about birth if you feel that your perspective or your previous experiences impact the type of care that is best for you.

Environment

Explain what type of lights, sounds, voices, music, and smells you prefer. Be sure to comment on the overall tone of care you wish for, such as light-hearted and friendly, sacred and reverent, hushed voices, or casual and comfortable conversation. If you prefer to limit conversation or extra personnel (such as medical students) say so here.

Pain Management: Preferences, Preparations, & Help You Would Like Today

Share in this section your plans for an epidural, IV narcotics, or natural techniques. Make specific requests such as: help with breathing, relaxation, positions, cold wash clothes, and so on. Ask for aids that you would like present such as: a birth ball, extra pillows, and/or the use of a tub or shower. Paint a picture of the type of help you would like.

Routine Orders, IV Access & Method of Fetal Monitoring

This box pertains to standard routines at your place of birth. Learn what the routine practices are where you are giving birth for things like assessments and lab work when you arrive in triage, the use of IVs, policies about eating and drinking in labor, and the method of fetal monitoring. You may simply write "standard practice" if you are planning to follow the routine protocols at your place of birth. Some hospitals or care providers offer choices and you may simply indicate your preference. Other times you may find that choices are not routinely offered, and that veering from the routine practice at your place of birth is unusual. If this is the case you need to discuss your preferences with your care provider ahead of time. Use this box to indicate that you and your care provider have agreed to the following, and then list the interventions that you are anticipating upon arrival and throughout your labor.

Approach to Additional Interventions

Let your birth team know if you are eager for any interventions they recommend, or if you prefer to avoid interventions. You do not need to list every intervention here! Simply state your general approach. If there are any particular interventions you feel strongly about, or that are an exception to your general approach add those details. You may also use this section to ask for the type of information you want if your care provider thinks an intervention may be useful or necessary.

During the Pushing Phase

Let them know what type of help and environment you prefer during the pushing stage.

Third Stage

Share your requests regarding when to clamp and cut the cord, intramuscular Pitocin, and delivery of your placenta. If you wish to keep your placenta, say so here.

After the Baby's Birth

Share your preferences for the environment after the baby is born as well as your preferences for baby procedures, skin to skin contact, and feeding.

Unexpected Situations

In this section, list your personal preferences in the case of a cesarean birth, NICU admission, or any situation where mom and baby must be separated.

Our Birth Plan

*We are so grateful for your help today
as we birth our baby! Thank you.*

Preferred Names

Birth Mom:
Partner/Spouse:
Baby:
Others who will be with us:

Pertinent Health Information

Midwife/Doctor:
Baby's Doctor:
Allergies:
History:

Personal Background, Preferences & Cultural, Spiritual, or Family Traditions

Environment

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Routine Orders, IV Access & Method of Fetal Monitoring

Approach to Additional Interventions

During the Pushing Phase

Third Stage

After the Baby's Birth

Unexpected Situations