

MAMA BIRTH INTENTIONS AND PREFERENCES



Thank you for choosing our team for your care during pregnancy and birth. Here are some standard MAMA practices to keep in mind:

- We keep cervical exams to a minimum, doing them only if they will affect our management
- We do not perform routine episiotomies, enemas or shaving
- Comfort measures include hydrotherapy, birth ball/stool, massage
- We do not require routine IV access, except in the case of TOLAC (trial of labor after cesarean)
- For the majority of our clients, we can use intermittent fetal monitoring. Some exceptions include TOLAC candidates, women using pain medication, inductions, if there is a fetal heart rate abnormality, or certain complications of pregnancy
- In accordance with World Health Organization guidelines we recommend active management during the delivery of the placenta, which includes a small dose of Pitocin after the baby is born to prevent postpartum hemorrhage
- We practice delayed cord clamping and immediate skin-to-skin unless there is an immediate medical necessity to evaluate the baby
- We are a teaching hospital and may ask if you would be willing to have a student involved in your labor and birth. We encourage you to consider participating

Please answer the following to help us better care for you:

Support person(s) for birth, including partner, Doula or other (please note we have a 3 person maximum):

[Redacted area for support person information]

Partner involvement/preferences (eg: cord cutting, assisting in catching the baby, announcing sex of the baby or any other pertinent partner or support person(s) information)

[Redacted area for partner involvement information]

Any childbirth education classes attended:

[Redacted area for childbirth education classes]

Intention regarding pain medication for labor (options include un-medicated, nitrous oxide, narcotic medication, epidural or open to decide in the moment):

[Redacted area for pain medication intention]

What is your preferred style of interaction with medical team? Examples: Do you like detailed explanations or concise reports? Need to know what the data says? Prefer supportive language? Prefer to avoid medical terminology?

[Redacted area for preferred style of interaction]

Please indicate your preferences for a cesarean birth is planned or becomes necessary. We offer the following in non-emergent situations; one support person present for the delivery, choice of drape (clear or standard), and skin-to-skin contact with baby in the operating room.

[Redacted area for cesarean birth preferences]

Please share with us anything else about who you are and what you need (i.e., family traditions, spiritual, cultural or religious customs, Specific fears/concerns, health history, labor or birth history that might help us better support you in labor etc.) Please feel free to expand on separate sheet if needed.

[Redacted area for additional information]

PLAN FOR INFANT POST DELIVERY

Plan for infant feeding while in the hospital, breastfeeding or formula feeding:

[Redacted area for infant feeding plan]

Planning circumcision, yes or no:

[Redacted area for circumcision planning]

Standard practice is for babies to receive Hepatitis B Vaccine, Erythromycin eye ointment and Vitamin K after the first hour of birth. Please let us know if you plan to decline any of these.

[Redacted area for vaccine/ointment/vitamin K plan]