

MY BIRTH PLAN

Name: _____ OBGYN/Midwife's name and contact info: _____

Baby's due date: _____ Baby's pediatrician name and contact info: _____

Emergency contact and relationship: _____

Any pre-existing conditions: _____ Current medications: _____

Are you vaccinated against
COVID-19: _____

In the past 3 weeks I have:

- Tested positive for COVID-19: **Y/N**
- Come into contact with someone who tested positive for COVID-19: **Y/N**
- Had a fever or persistent cough: **Y/N**

1) Where would you like to have your baby?

2) Name and number of person you want to be with you during labor and delivery?

3) Would you like to have virtual support from friends and family?

Phone Google Meetup WhatsApp
 Zoom Facebook Other _____

4) Who do you want to manage your communications with friends and family during labor?

5) WiFi password of your location? _____

6) My delivery is planned as:

Vaginal Water Birth
 C-Section VBAC

7) Do you want to limit the number of staff who enter your room? If so, please explain: _____

8) What help do you need from your support team during labor?

Breathing Exercise Help Massage
 Coaching During Contractions Help Walking Around
 Help With Birth Balls Other _____
 Words of Encouragement

9) Would you like to bring labor tools with you?

Birthing Stool Squatting Bar
 Birth Ball Mirror
 Peanut Ball Other _____

10) What, if any, kind of pain medicine would you like?

11) Are you willing to have an episiotomy? **Y/N**

12) What labor positions do you prefer?

Laying Down Squatting
 Lying on Side Leaning on My Partner
 Standing Other _____
 Sitting

13) Are there any special traditions you would like to take place when your baby is born? _____

14) Do you want to delay cord-clamping so your baby gets more blood and nutrients from your placenta? Y/N

15) Who do you prefer cuts the umbilical cord?

16) Do you want to donate or bank the blood from the umbilical cord? Y/N

17) Do you want to have skin-to-skin contact with your baby immediately following birth? Y/N

18) Do you want your baby to spend time in the nursery? Y/N

19) Are you planning to breastfeed? Y/N

20) Would you like a consultation with a lactation specialist? Y/N

21) Do you want staff to get your permission before giving your baby formula or a pacifier? Y/N

22) If you're having a boy, do you want him to be circumcised? Y/N

23) Is there anything else those caring for you should know about you or your baby's birth?

Before your due date, be sure to ask your facility the following:

- Are virtual tours of the facility available? _____
- What am I allowed to bring with me? _____
- Can I have a support person with me during labor and delivery? _____
- How many friends and family can be in the room? How many can visit? _____
- If I'm not allowed to have anyone with me, how will staff handle my emotional and physical needs? _____

- Do my baby and I have to be tested for COVID-19? What happens if either of us test positive? _____

- What are your other COVID-19 precautions? _____
- Will I have to wear a mask at all times? _____
- How long is the average window between delivery and discharge? _____
- Are there any other labor and delivery policies I'll have to follow? _____

Upon arrival on the big day, ask:

- What happens if I'm hungry or thirsty during labor? _____
- Are there food services available for my personal support team? _____
- Are there any new labor and delivery policies? _____
- Do I have to stay in my room during labor, or can I walk around? _____