

BIRTH WISH LIST

*I understand LCM 's usual approach to birth and midwifery care. I know that continuous fetal monitoring, IV's, induction or augmentation of labor with Pitocin or other medications, episiotomy, breaking the bag of waters, instrumental delivery, and cesarean section are all **non-routine** events that could be needed, but generally are not. I realize the midwives will discuss any of these types of interventions with me if necessary. I expect that warm water immersion, walking and positioning, massage and relaxation techniques, drinking clear liquids, and pushing in any position, are available to me in normal circumstances, as well as the full range of pain medication. I realize it's important to be flexible, but here are my wishes:*

Name: _____

- My birth support people will be _____.
- It is very important to me to do everything possible to have an unmedicated birth. Please don't offer medication to me; if I want to change my mind, I will ask.
- I am very interested in trying for an unmedicated birth experience, but unsure what I will choose in labor, or how things will go. Let's wait and see.
- I am fairly sure, or very sure, that I want to have an epidural for labor and delivery.
- I am having a scheduled or repeat cesarean section.
- This is not my first birth, and I am interested in inducing labor if I have not delivered by the time near my due date, or after that date.
- I want to try for the least amount of intervention possible; please only talk about those things to me if medically indicated.
- My partner _____ would like to cut the cord, if medically appropriate.
- My partner _____ would NOT like to cut the cord: please don't ask!!
- I realize a two-night stay after a vaginal birth is routine, but I will probably ask to be discharged from the hospital early, if all has gone well.
- I think I will probably stay in the hospital the full 2 nights after my baby's birth.
- Special concerns and requests and concerns regarding me:

About the Baby:

- When my baby is born, I would like to hold her/him on my abdomen first, if no resuscitation is needed.
- When my baby is born, I would like her/him to be assessed and wrapped up by the nursery staff before I hold her/him.
- I realize eye ointment and Vitamin K are routine medications recommended by the American Academy of Pediatrics and the Department of Health and are administered after the birth. That's fine with us, but please wait until we've bonded.
- I plan to breastfeed and would like to do so as soon as my baby is stable. Please defer any non-urgent procedures until after we've had some time together.
- I plan to bottle feed my baby, but still want time with baby in my arms before the routine procedures.
- I have a history of breast or breastfeeding issues and may need lactation consultation after delivery.
- Regarding circumcision for a boy: Yes, please No, Thank You
- The doctor who will be taking care of our baby is_____.
- My baby's doctor does not have privileges at Loudoun Hospital, so I realize the Neonatology doctors will care for my baby until we go home. When we are discharged, please fax the baby's records to this number_____.
- Special concerns and requests about my baby:_____
- _____

Name:_____