My Birth Plan

Name ..... **Due date** .....

Name(s) and contact numbers of birth partner(s) .....

Birth companion

Who will be your birth partner? .....

Do you want them with you at all times? .....

What relationship are they to you? .....

Special needs

Do you have any particular needs? .....

(E.g. religious, dietary or disability requirements)

Positions for labour and birth

Do you want to be mobile for as long as possible? .....

How do you think you might like to give birth? kneeling / squatting / standing / in bed?

Birthing pool

Do you want to use one if available? .....

Do you want to use it for pain relief and/or to give birth in? .....

Pain relief

Do you want any? .....

Which forms of pain relief would you prefer and in what order? epidural / tens / gas and air / pethidine? .....

After the birth

Would you like to have skin-to-skin contact? .....

Do you or your partner want to cut the cord? .....

Do you want your baby to be given Vitamin K? Yes – by injection / orally / No?

(If you are unsure about the benefits, speak to your Midwife)

Delivery of the placenta

Do you want to deliver it naturally if possible? .....

Would you rather have an injection to speed things up? .....

Feeding your baby

Once your baby is born, do you plan to breast or bottlefeed them? .....

Unexpected situations

If a caesarean is required, what are your views on this? .....

If an assisted delivery is necessary, what are your views on this? .....

What do you want to do if your baby has to go to a special care baby unit? .....

General

Do you want students observing or helping? .....

This information is available to you in response to your individual request for information from Cow & Gate.