

# Birth Preferences: The Ultimate Guide to Creating Your Birth Plan

*plus* a fillable template!



"There is no one right way to have and raise a baby. Our doulas help as you find your way."

—Doulas of Baltimore founder Emily Pelton



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### We are Emily Pelton and Deborah Bailey!

Since 2002, Doulas of Baltimore's founder Emily Pelton has been a source of support and knowledge for over a thousand new and growing families in the Baltimore area. In 2014, she turned her independent business into a full-service doula agency. In addition to maintaining a successful doula agency, Emily also inspired the next generation of birth workers as a birth and postpartum doula trainer!

In 2018, Emily again expanded Doulas of Baltimore to partner with Deborah Bailey, a long-time doula (and mentee of Emily's!) and business owner.

Together, Emily and Debbie have cultivated a talented group of 12 professional doulas who work with growing families across the metro Baltimore area.

## Section 1:

# Creating and communicating your birth preferences

**The process of discussing, prioritizing and communicating your preferences is the first step toward having a satisfying birth experience as you define it.**

Documenting these preferences in a visual “Birth Plan” is a great way to ensure you, your partner, your doula and your care providers are all on the same page during your birth experience. This also reduces the emotional burden you as the birthing person carry of attempting to ‘direct’ your experience while in labor!

Your birth support team- partner, care providers, doula, etc., are all available to assist you with the process of developing these preferences! Knowing the standards of care, protocols and policies in place for your birthing location will save you time when crafting your birth preferences. Don’t ever hesitate to ask for their opinions, further information or additional resources. They are available to you to make your birthing experience one you can look back upon fondly!



## Section 1:

# Creating and communicating your birth preferences

### Here are some tips for creating a clear, concise overview of your top birth preferences.

- Keep your list no longer than 2 pages (one is ideal).
- An outline format broken down by stages of labor and the use of bullet points allows for ease of readability!
- Don't feel like you need to answer every question on this list- choose the four or five most important preferences to make it onto your birth plan.
- Speak with your doula about their experiences at your birthing location; what are standard practices, and what has their experience been like with others at that hospital?
- Use positive language such as "I would like..." as much as possible. Do your best to avoid negative "No/Don't" statements.
- Consider all stages of labor. We recommend organizing your list into Active Labor, Second Stage (pushing), and Third Stage (immediate postpartum) and Newborn Care (the immediate postpartum experience with your baby).
- Leave out extraneous details like what hospital you prefer, and things you plan to do at home during labor or instructions for your partner. There's no need to say "I would like to labor at home as long as possible" because by the time your nurses are looking at your list, you'll already be at the hospital.
- Remember that your care providers are there to support you the best way they know how! Most care providers are very willing to try and be flexible with many client requests, even if they cannot meet all of them.
- Most of all, bringing a working copy of your birth preferences outline to a prenatal appointment is always a great idea. Requesting your care providers to review it with you helps to ensure your requests are noted ahead of time. You can then ask them to place a copy in your chart as well.



## Section 2:

# Considerations for your Vaginal Birth Experience

### Preparing for an Induction of Labor:

- Do you have preferences on time of day for arrival for your scheduled induction? When does your provider/birth location prefer to schedule inductions?
- Do you have a preference for IV placement?(Non dominant hand or arm is recommended)
- What are your preferences regarding cervical ripening if necessary (Cytotec, Cervadil, Foley catheter, etc)?
- How would you prefer pitocin to be utilized? What are the recommendations from your care providers regarding pitocin dosage?
- Do you have a preference regarding monitoring during your induction (wireless, telemetry, traditional abdominal bands, internal, etc)?
- How do you feel about artificial rupture of membranes (breaking of your water)?

### Hospital Considerations

- What environmental factors would you prefer to enhance your labor experience? (Do you want to have the ability to walk around the room, use a birth ball, have the lights dimmed, specific music playing, etc?)
- Would you prefer a hospital gown or to wear your own clothing during labor?
- Who will be present for your birth? What will be their roles?
- Is there anyone you'd like to limit access to your room? (Such as, "Please, no students." or "Please do not allow my sister-in-law, Jane Doe, access to my hospital room.")



## Section 2:

# Considerations for your Vaginal Birth Experience

### **Active Labor:**

- What are your preferences regarding food and drink during labor? How does that align with your providers and birthing location?
- Would you like to receive IV fluids during your labor? If necessary, would you prefer medications (antibiotics, anti-nausea meds, etc) administered orally, via IV or as injections?
- What are your preferences regarding pain relief options? Consider things like when/if you would like medication offered or suggestions regarding the timing of receiving pain medication or if you prefer not to be offered (rather to ask) for medication.
- Do you have a preference regarding fetal monitoring? What are your options for monitors at your birth location (wireless, telemetry, traditional abdominal bands, internal, etc)?
- How do you feel about labor augmentations such as cervical ripening medications, Foley catheter, Pitocin, artificial rupture of membranes (breaking of your water), etc?
- What is your preference regarding the frequency/timing of cervical exams during your labor? What information (such as changes in dilation, effacement, baby's station) would you want to know after an exam?

### **Pushing/Second Stage:**

- When and how would you like to push? How do you feel about coached/guided pushing (usually counting and cheering)? Pushing instinctively?
- Do you have preferences regarding looking/feeling for the baby during pushing (use of a mirror, touching baby's head when crowning, etc)?
- When and why might assistive tools like forceps, vacuum or episiotomy be utilized by your providers? How do you feel about these tools and under what circumstances would you be comfortable utilizing them?
- Would you prefer the use of foot/leg rests or having your partner,/doula/nurses, etc support for legs during pushing?
- Do you have any cultural, religious or personal preferences during your birth (such as silence when the baby is born, being the first to touch your baby, etc)?
- Would you like to have photographs and/or video taken during delivery? Who will be taking them and with what device? Any limitations on what you would/would not like photographed?

## Section 2:

# Considerations for your Vaginal Birth Experience

### Immediate Postpartum:

- What are your preferences regarding the umbilical cord clamping and cutting (when and who specifically)?
- Do you have a preference regarding expectant vs managed third stage (delivery of the placenta)?
- Would you prefer your baby placed immediately on your chest, or cleaned up, examined, etc. before being handed to you?
- What are your preferences for the immediate postpartum? For example, “I would prefer my baby to remain skin to skin for the first hour and delay any routine procedures until after this time”.
- How much information would you like to receive regarding your immediate maternal postpartum recovery (for example, any tears or lacerations that require repair, amount of bleeding, etc)?
- Do you have any requests regarding your placenta; would you like to see it? Do you plan to keep it?



### Newborn Care:

- What are your plans for feeding your baby? Would you like to speak to a lactation consultant or have access to a breast pump during your postpartum stay? Would you like to have formula provided for you?
- How do you feel about the routine newborn procedures at your birth location? This could include erythromycin eye ointment, Hepatitis B vaccination, Vitamin K injection,, etc.
- If it is necessary for baby to leave your room, where would you like your partner to go?
- When and where would you like your baby first bathed? Who would you like to be involved in this process?
- If having a boy, will he be circumcised before leaving the hospital?

## Section 3:

# Planning your Cesarean Birth

**Cesarean birth IS birth - go confidently knowing you are making a well-informed choice! Your rights, options and preferences matter as you plan for a positive cesarean birth experience, and you are worthy of consideration from your care providers.**

A clear, concise outline of birth preferences in your chart and available to your providers is a quick and easy way to ensure you have the birth experience you desire.

When your birthing day arrives, celebrate it! Spend some time dancing, laughing and reminiscing with your partner on positive memories between the two of you. Wear something to the hospital that makes you feel beautiful and strong. Chat cheerfully about the excellent meal you'll have afterward! Make every moment for memories.

### **Planning, Hospital Arrival & Pre-Op:**

- Do you have preferences on time of day for check in? Consider traffic, dietary restrictions, child/pet care, etc.
- Do you have a preference for IV placement?(Non dominant hand or arm is recommended)
- How do you feel about the process of surgery preparation? Would you like each step explained or detailed?
- How does your partner feel confident with their role in the OR? When will they enter, where will they sit and what should they do during the procedure?
- What are your preferences regarding your pre-birth environment? Lighting, music, etc.
- Do you have any limitations regarding access to your pre-op room?





## Section 3:

# Planning your Cesarean Birth

### **Operating Room/Delivery:**

- Who will accompany you to the OR? Partner, doula?
- Would you like the steps of the procedure be explained as they happen, or would you prefer to focus on your partner/doula?
- Do you want to take photographs during/after delivery? What pictures or memories are most important to you? Is your partner willing/able to capture them? Are you comfortable with asking/giving your phone/camera to a nurse?
- Would you like to play music in the OR if possible?
- Do you have preferences regarding use of a clear drapes, or having the drape lowered at the moment of delivery?
- Do you have any cultural, religious or personal preferences (such as silence when the baby is born, partner announcing gender, etc)?
- What are your options and preferences regarding cord clamping and cutting?
- Are you able to have skin-to-skin with baby after delivery in the OR?
- Would your partner like to join baby at the warmer in the OR when invited or stay by your side?
- Would you like to see or keep your placenta? Are you planning to store or donate cord blood?
- If separation is necessary, do you have a preference regarding whether your partner follows you to the PACU or remains with your baby(ies)? If your doula is present, what would your preference be for her at that time?

### **PACU/Post-Op:**

- Who would you prefer to be with you in the PACU? What are the limitations of your birthing location regarding recovery room visitors/guests?
- Do you have any specific preferences for medications immediately after surgery?
- Would you prefer to hold your baby while in the recovery room?
- Would you like assistance facilitating baby's first feeding in PACU or would you prefer to wait until you are settled in the postpartum area?
- Would you like photos/videos taken during this time?



## Section 3:

# Planning your Cesarean Birth

### **Recovery/Postpartum:**

- Who would you prefer to be with you during your postpartum recovery? Are guests/visitors permitted and if so, what will their roles be during your recovery?
- Do you have any specific preferences for pain medications during the postpartum?
- Are you comfortable with the designated surgical site care? Is your partner able to help?
- What would be your preference for discharge? How long do your care providers recommend that you stay in the hospital?

### **Newborn Care:**

- What are your plans for feeding your baby? Would you like to speak to a lactation consultant or have access to a breast pump during your postpartum stay? Would you like to have formula provided for you?
- How do you feel about the routine newborn procedures at your birth location? This could include erythromycin eye ointment, Hepatitis B vaccination, Vitamin K injection, or PKU testing, etc.
- If it is necessary for your baby to leave your room, would you like your partner to go with baby or stay with you?
- When and where would you like your baby first bathed? Who would you like to be involved in this process?
- If having a boy, will he be circumcised before leaving the hospital?



# Birth Preferences

**This is a sample outline – See next page for a fillable version!**

**Welcome to the birth of Baby** \_\_\_\_\_

**Birth Person:** \_\_\_\_\_ **Partner:** \_\_\_\_\_ **Doula:** \_\_\_\_\_

Thank you for your dedication to our family's well being. We understand that childbirth is unpredictable by nature, and appreciate your flexibility during this process in advance. We prefer to discuss all options and recommendations so that we may provide informed consent.

Please observe the following preferences for the birth of our baby whenever possible:

## **Active Labor:**

- I appreciate intermittent monitoring to allow as much mobility as possible
- I prefer to eat and drink throughout labor, in addition to IV fluids
- I would like to discuss pain relief options with my nurse and/or anesthesiologist
- I prefer to limit cervical checks and unless requested, not to be told dilation

## **Pushing and Delivery:**

- I would prefer to push in whatever position is most comfortable for me at the time
- I would like gentle guidance on when and how to push
- I would like access to a mirror during pushing if possible
- I prefer to be the first person to touch my baby

## **Immediate Postpartum:**

- I prefer to have delayed cord clamping and cutting, until the cord stops pulsing
- I would like my partner to cut the cord
- I strongly prefer expectant management and to avoid the use of pitocin if possible
- Please delay all routine newborn procedures until after I have had at least an hour to bond with my baby

## **Newborn Care:**

- I am planning to breastfeed and would like to see a lactation consultant after delivery.
- Please delay all bathing of our newborn.
- We prefer to decline the erythromycin eye ointment.

## **In case of cesarean:**

- Please allow my partner and doula to join me in the operating room if at all possible
- I would prefer leads to be placed off my chest so that I may have skin to skin with my newborn in the OR.
- I would like to play music in the operating room.
- I would like my partner to go wherever the baby goes, and my doula to remain with me in recovery.

# Vaginal Birth Preferences

Welcome to the birth of Baby \_\_\_\_\_

**Birth Person:** \_\_\_\_\_ **Partner:** \_\_\_\_\_ **Doula:** \_\_\_\_\_

Thank you for your dedication to our family's well-being. We understand that childbirth is unpredictable by nature, and appreciate your flexibility during this process in advance. We prefer to discuss all options and recommendations so that we may provide informed consent.

Please observe the following preferences for the birth of our baby whenever possible:

## Active Labor:

## Pushing and Delivery:

## Immediate Postpartum:

## Newborn Care:

## In case of cesarean:

# Cesarean Birth Preferences

Welcome to the birth of Baby \_\_\_\_\_

**Birth Person:** \_\_\_\_\_ **Partner:** \_\_\_\_\_ **Doula:** \_\_\_\_\_

Thank you for your dedication to our family's well-being. We understand that childbirth is unpredictable by nature, and appreciate your flexibility during this process in advance. We prefer to discuss all options and recommendations so that we may provide informed consent.

Please observe the following preferences for the birth of our baby whenever possible:

## Hospital Arrival & Pre-Op:

## Operating Room/Delivery:

## PACU/Post-Op:

## Recovery/Postpartum:

## Newborn Care:

Section 5:

# What's next? Further support for your growing family

**Congratulations! You've taken a huge first step toward achieving the birth experience that you desire!**

**If some of the topics or phrases you've come across during this process feel overwhelming, you're not alone. We hear from hundreds of new families how inundated they feel by the massive amounts of information regarding pregnancy, childbirth and parenting. It can be a lot to sift through the information available and figure out what actually appeals to your family.**

**The good news is that you don't have to do it alone! Doulas of Baltimore can help ease that burden.**

We offer straightforward, evidence-based childbirth and parenting education classes in small group workshops (both virtually and in-person) as well as customizable, private, in-home education. Armed with resources, knowledge and a toolkit of decision-making skills, you, and your partner, can go confidently into your birth experience.

Looking for a bit more personalized support throughout your journey? Our team of professional birth doulas is ready to help. Hiring your own dedicated birth doula is very much like that steadfast friend who isn't afraid to ask the hard questions, always knows where to find the answers and provides unconditional validation and reassurance....who also happens to be an expert on pregnancy, birth and babies!

**[Click here to schedule a complimentary phone consultation to find out what support is right for your family.](#)**

**Schedule Now!**

We look forward to supporting you on your journey!

Emily  
Bebbie

