

My birth plan

Background details				
Your name:		Your baby's due date:		
Name you preferred to be	called, e.g. Catherine = Cat	hy:		
Your birth partner's name	and contact details:			
Doctor:		Midwife:		
Doula:		Paediatrician:		
Hospital/birthing centre's	address:			
The birth				
Is there a particular midw	rife you would like to be ther	e if she/he/they is available?		
☐ Yes*		☐ I don't mind		
*Midwife's name:		*Midwife's contact no:		
Would you prefer to be co	red for and delivered by wo	men only?		
☐ Yes	□ No	☐ I don't mind		
Are you happy to have sti	udent midwives or medical s	tudents present at the birth?		
☐ Yes	□ No	☐ I don't mind		
Would you like your birth	partner(s) to be with you th	roughout your labour?		
Yes	☐ Not necessarily			
What position would you	like to be in for the birth?			
☐ Standing	☐ Birth stool	Squatting	Sitting	
☐ In bed	☐ Kneeling	☐ Water birth	☐ Birth ball	
☐ Side lying	☐ Other:			
Pain relief				
Would you like any pain re	elief?			
☐ Yes	□ No	☐ I would like to be advised by the midwife		
What pain relief would yo	ou like?			
Entonox (gas and air)	☐ TENS	☐ Alternative therapy, e.g. massage, aromatherapy etc		
☐ Pethidine	☐ Epidural	☐ I don't mind ☐ Other:		

If an assisted delivery is	necessary, v	which method wou	ld you prefer?		
☐ Ventouse ☐ Force		eps I will allow the		midwife/obstetrician to make the choic	
How do you feel about h	aving an ep	oisiotomy if it was I	equired?		
☐ I'd rather have it than risk a potential tear		☐ Only if it's necessary		l'd like to avoid having one, even if there is a risk of tear	
Should you need a caesa	rean, would	d you like any of th	e following?		
☐ To stay conscious		☐ My birth partner to be with me the whole time		☐ To hold my baby right away after delivery	
Other:					
After the birth					
Would you like your birt	n nartner ta	cut the cord?			
☐ Yes	∏ No	, cat the tora.	☐ I will allow the midwife/obstetrician to make the choice		
Would you like your hah	v to be put	straight on your tu	mmy or cleaned un	first?	
Would you like your baby to be put straight on your tu Onto my tummy		☐ Cleaned up first			
Would you like to be told	I the sev of	vour hahv?			
Yes	☐ No, I	want to make iscovery myself	☐ I already know sex of my baby		☐ I would like my birth partner to tell me
How would you like the	olacenta to	be delivered?			
☐ Naturally without any drugs			☐ With an injection to help the uterus contract		
How would you like you	baby to be	given vitamin K?			
☐ Orally		jection	☐ I don't mind		
How are you planning to	feed your	baby?	I		
Breastfeed		nula feed	☐ Combination		
Would you like help with	breastfeed	ling/formula feedi	ng?		
Yes	□ No				
Do you have any special	needs, whe		d to your culture, r	eligion, ye	our diet or any disabilities?