

Birth preferences outline your wishes and desires for your baby's birth and can help you have a positive birth experience. After reviewing the suggestions on this page, please fill in the birth preference sheet attached and share it with your healthcare provider **and** your support people before you go into labour. Also, bring it with you to the hospital so your labour nurses know your goals. The health care team will follow routines and procedures that promote a healthy outcome for you and your baby. Jim Pattison Children's Hospital is a teaching facility. Talk with your caregiver about the role of students and residents in your care. Remember, too, that birth doesn't always go the way you planned and you need to know your options and be flexible with your expectations.

### Labour:

Think of things that will help you feel safe, relaxed and in control.

#### Environment:

- Dim lighting
- Quiet
- Music
- Wear your own clothing
- Items from home (pillow, facecloth)
- Limit interruptions

#### Mobility:

- Standing, walking
- Squatting, birth ball
- Lying in bed
- Shower/tub
- Birth pool (midwife only)

#### Hydration/Nourishment:

- Light snacks (early labour)/clear fluids
- IV (intravenous) fluids/saline lock

#### Pain Relief: (*no -medical*)

- Relaxation/breathing
- Changing position/walking/dancing/rocking
- Visualization/distraction
- Massage/TENS (bring your own and know how to use it)
- Tub/shower
- Hot and cold packs (not with an epidural)
- Acupressure/reflexology
- Hypnosis/meditation

#### Pain Relief: (*medical options*)

- Analgesic (pain medicine) – Morphine/Fentanyl
- Epidural analgesia
- Nitronox or 'laughing gas'
- Nothing
- Only offered at my request
- Whatever is suggested at the time

### Pushing and Birth:

Here are some things to think about for your birth. Some of them are routine, and others you need to talk about with your caregiver. If you don't have preferences, your caregiver will talk to you about a plan of care best suited for your delivery. Would you like to:

- Wait until the urge to push and/or baby descends, push when you feel like it, or be directed as to when to push?
- Push using a variety of positions like squatting, semi-reclining, side-lying, hands and knees, squatting bar, or just 'whatever feels right at the time'?

- Use massage, support, warm compresses, or alternate positions to decrease the risk of episiotomy?
- Use a mirror to see the baby's birth? Touch baby's head as it crowns?
- Push without time limits if safe?
- Delay cutting the cord? (Standard is 90-120 seconds if it is safe to do so.)
- Have your labour support person cut the cord? Bank the cord blood? (You must arrange this ahead of time with a commercial blood bank)
- See the placenta/**not** see the placenta/take it home?
- Record/take pictures of the birth

### **Interventions:**

These are some things to discuss with your caregiver around when they would be used, their risks and benefits, and your feelings or concerns, if any, about them.

**Induction (may/can help labour get started):** stripping membranes, prostaglandin vaginal insert, balloon catheter, oxytocin intravenously

**Augmentation (may/can help increase strength and effectiveness of contractions):** non-medical methods like walking, upright labour positions, nipple stimulation; breaking the waters (artificial rupture of membranes-ARM), oxytocin

**Monitoring:** external/internal, periodic/continuous

**Instrumental delivery:** vacuum, forceps, episiotomy

**Caesarean/Complications:** have a conversation with your care provider regarding possible birth complications

### **Baby Care:**

Are there any special traditions that you would like to do/participate in when it comes to your newborn i.e. an Indigenous Birth Support Worker?

Skin-to-skin is the standard of care and every effort will be made not to interrupt this important time for you and your baby.

Mothers and newborns are cared for together and not separated during tests and procedures. Skin-to-skin and breastfeeding is encouraged whenever possible (i.e. having blood taken).

Breastfeeding is promoted as the norm. Discuss your plans with your caregivers.

### **Other:**

Is there anything else that is important for your mother/baby team to know about your plans and desires or fears?

Birth Preferences for \_\_\_\_\_

My support people (include translator's name and phone number):

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Preferences about pain control:

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Medical interventions during labour:

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Pushing and delivery:

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Most important issues:

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Concerns or fears:

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Infant feeding:

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Newborn procedures:

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Other:

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