



# Birth Plan for Meriter Hospital

We like you better:  
**MERITER**

1. Your full name: \_\_\_\_\_
2. Name you would like to be addressed: \_\_\_\_\_
3. Partners name: \_\_\_\_\_
4. Other support people to be present at birth: \_\_\_\_\_
5. Due date: \_\_\_\_\_
6. Primary caregiver: \_\_\_\_\_
7. Prenatal classes you've attended: \_\_\_\_\_

***Please note:***

- Enemas, pubic hair shaving, episiotomies and IV's are **NOT** routine
- Underwater births are available, but a class is required. Please consult with your provider.
- We welcome you to take pictures and video tape those important moments of your labor, birth and of your newborn. However we do request that you ask permission from your provider and nursing staff before doing so.

**8. During Labor:**

- Would you like to walk and change positions at will? \_\_\_\_\_
- Would you like the lights in the room to be kept low? \_\_\_\_\_
- Will you bring your own music to play in the CD player provided? \_\_\_\_\_
- Do you prefer to wear your own clothes? \_\_\_\_\_
- Do you want to try using the birth ball? \_\_\_\_\_
- Would you like to use the bathtub or shower? \_\_\_\_\_
- Do you not wish to have your membranes broken unless signs of fetal distress require monitoring?  
\_\_\_\_\_
- If your membranes break at the onset of labor, do you want to wait at least 6-12 hours before artificially starting labor, if possible? \_\_\_\_\_

9. Do you have other labor preferences? \_\_\_\_\_

**10. Pain medication use preference:**

- Do you prefer to avoid pain medications? \_\_\_\_\_
- Do you prefer pain medications are not offered by staff, but instead you will request them if desired?  
\_\_\_\_\_
- Before considering an epidural, would you first like to try narcotic pain medication? \_\_\_\_\_
- Would you like an epidural at the point when you become uncomfortable? \_\_\_\_\_
- Would you like an epidural as soon as you can? \_\_\_\_\_

11. Do you have other pain medication preferences? \_\_\_\_\_

**12. During your delivery:**

- When pushing, do you prefer to change positions frequently? \_\_\_\_\_
- Would you like to use the squatting bar during pushing efforts? \_\_\_\_\_
- Would you like a mirror available so you can see the baby's head when it crowns? \_\_\_\_\_
- Would you like to touch your baby's head when it crowns? \_\_\_\_\_
- Would you like to use perineal massage? \_\_\_\_\_

13. If given the opportunity, who would you like to cut the umbilical cord? \_\_\_\_\_

**14. After the birth of your baby, and if the baby is okay, would you like:**

- Your baby to be placed on your stomach/chest immediately after birth? \_\_\_\_\_
- Your baby to be placed on your stomach/chest after being wiped off? \_\_\_\_\_
- The opportunity to see the placenta after the delivery? \_\_\_\_\_

*Note: Please talk to your caregiver before delivery if you would like to take your placenta home.*

15. Do you have other delivery and recovery preferences? \_\_\_\_\_

**16. If a cesarean birth is needed, would you like someone to be in the surgical suite with you?**

If so, who? \_\_\_\_\_

**17. If the baby is not in distress:**

- Do you want your partner to watch the baby's initial assessment? \_\_\_\_\_
- Do you want your partner to bring the baby to you? \_\_\_\_\_
- Do you want your partner to use skin-to-skin cuddling ("kangaroo hold") to keep your baby warm?  
\_\_\_\_\_

**18. Do you have other cesarean birth preferences?** \_\_\_\_\_

**19. Would you like someone to assist with giving the baby his/her first bath? If so, who?**

\_\_\_\_\_

**20. If you have a boy, are you planning to have him circumcised?** \_\_\_\_\_

**21. Feeding:**

- Do you intend to breastfeed your baby? \_\_\_\_\_
- Do you intend to formula feed your baby? \_\_\_\_\_

**22. Announcing the birth:**

- Do you want the birth published anywhere? \_\_\_\_\_
- Do you plan to announce our baby's birth in the local newspapers? \_\_\_\_\_