

Making a birth plan will help you better understand all of your options and make choices about your labor and delivery experience. A birth plan can also help you share your preferences with your health care provider and hospital birth team. After looking over this list, you may have some questions about different procedures and practices at the hospital. Be sure to share this form with your healthcare provider so you can have all of your questions answered and to see whether they can support your choices.

A birth plan is not a guarantee of how your birth will go, but simply states your preferences for labor if everything goes normally. Of course you are free to change your mind during labor, and your provider will also make decisions based on medical necessity. You can let your doctor know that you trust their expertise and will cooperate fully should a medical emergency arise, but would also like to be fully informed about risks and benefits to both mother and baby for all interventions that are being considered.



This birth plan expresses my preferences and desires for my birth experience. I understand that situations may arise during labor or delivery that prevent these wishes from being carried out, and that flexibility may be required to provide a safe and satisfying experience.

Patient		
	(name, signature, date)	
Clinic Staff		
	(name, signature, date)	
Hospital Staff		
•	(name, signature, date)	

STAGE	OPTIONS	COMMENTS
	I would like to: (check all that apply)	
Labor	Drink fluids and eat lightly during early labor.	
	Walk to labor and delivery when I get to the hospital.	
	Have a friend/relative with me throughout labor NAME(s)	
	Have a friend/relative with me during delivery NAME(s)	
	Have my delivery room kept as quiet as possible. Have the lights in my room be kept low.	
	Have ice chips and popsicles	
	Take pictures and videos during labor and birth. (I understand that I cannot videotape the actual birth at University Hospital.)	
	Have the freedom to walk and change positions.	
	Have continuous fetal heart rate and contraction monitoring.	
	Have intermittent fetal heart rate and contraction monitoring (unless continuous monitoring is required by the condition of baby).	
	Have my IV placed in my arm, rather than my hand, so that I can move around easier.	
	Have a saline lock instead of an IV (will get IV fluids if necessary).	
	Use alternative pain techniques  □ Music □ Shower □ Walking □ Massage □ Warm/cold compresses □ Relaxation	
	Keep vaginal exams to a minimum.	
	Ask for pain medications when I need them. Please do not offer me pain medications.	
	Try an injection of narcotic pain relief (Stadol or similar) before I have an epidural.	
	Have an epidural only after I reach 5cm dilation.	
	Have my epidural weakened before the pushing stage so I can feel the urge to push.	
	Have an immediate epidural and feel no pain if possible, even it if means slowing down my labor.	
	Have spontaneous rupture of membranes, rather than artificial rupture.	
	Discuss all options if labor is not progressing (including pitocin, walking, positions, artificial rupture of membranes)	
	Prefer than no students, interns, residents, or non-essential personnel be present during my labor or birth.	

Be able to choose the position in which I push and give birth.  Have my labor partner endror labor nurses support me and my legs as necessary during the pushing stage.  Try to vari until fred the urge to push before I am coached to start pushing (even if I am fully reliese).  Have coaching to help me know when to push.  Use spontaneous pushing, and not be coached to push (unless I am not making progress).  Have an episiotomy rather than a tear.  Avoid an episiotomy rather than a tear.  Avoid an episiotomy rather than a tear.  Avoid an episiotomy unless required for the baby's safey. I would like to use.  I Perineal massage & support. I witem compresses. In Slower delivery in Pantingblowing.  Have a mirror available so I can see the baby's head when it crowns.  Touch the baby's head when it crowns.  Have my labor partner cut the cord or cut the cord myself.  Have the doctor cut the cord.  Have the baby paramirediately on my stomachichest before being cleaned and wrapped.  Have the baby oxamination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Bully informed and participate in decision making if cesarean is indicated.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitcon after the delivery to aid in expelling the placenta (unless it is needed to preven theavy becoming.)  Have the baby worn-in after I have had some time to recover.  Have the baby worn-in after the delivery to aid in expelling the placenta (unless it is needed to preven theavy bedefing).  Have the baby with me during the day, but in the nursery at night. I would like the baby torou-in after the advant		I would like to: (check all that apply)	
pushing stage. Try to wait until feel the urge to push before I am coached to start pushing (even if I am fully dilated). Have coaching to help me know when to push. Use spontaneous pushing, and not be coached to push (unless I am not making progress). Have an episiotomy rather than a tear. Avoid an episiotomy unless required for the baby's safety. I would like to use: — Perineal message & support. — Warm compresses:—I shower delivery:—Partingblowing Have a mirror available so I can see the baby's head when it crowns.  Touch the baby's head when it crowns. Have my labor partner cut the cord or cut the cord myself. Have the doctor out the cord. Have the baby placed immediately on my stomach/chest before being cleaned and wrapped. Have the baby paced immediately on my stomach/chest before being cleaned and wrapped. Have the baby progress and treatments for the baby's (e.g. eye treatment, etc.). Hold the baby for	Delivery	_	
Try to wait until i feel the urge to push before i am coached to start pushing (even if i am fully dilated).  Have coaching to help me know when to push.  Use spontaneous pushing, and not be coached to push (unless I am not making progress).  Have an episiotomy unless required for the baby's safety. I would like to use:  □ Perineal massage & support: □ Warm compresses: □ Slower delivery: □ Panting/blowing  Have a mirror available so I can see the baby's head when it crowns.  Touch the baby's head when it crowns.  Have my labor partner cut the cord or cut the cord myself.  Have the doctor cut the cord.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby examination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to (check all that apply)  Have the baby room-in and be with me at all times.  Have the baby room-in and be with me at all times.  Have the baby room-in and be with me at all times.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if if an breatefeding.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if a micreatfeeding.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if a micreatfeeding.  Figure and the promoner in a promoner in the presented for mother.  Receive information about bety care.  Receive add			
Have coaching to help me know when to push.  Use spontaneous pushing, and not be coached to push (unless I am not making progress).  Have an episiotomy rather than a tear.  Avoid an episiotomy rather sequired for the baby's safety. I would like to use.  □ Perinsel massage & support. □ Warm compresses □ Slower delivery □ Panting/blowing  Have a mirror available so I can see the baby's head when it crowns.  Touch the baby's head when it crowns.  Have my labor partner cut the cord or cut the cord myself.  Have the doctor cut the cord.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby examination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for □ minutes before he/she is taken awary for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN. Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN. Have my labor partner present at all time during a cesarean.  CESAREAN. Have my labor partner present at all time during a cesarean.  CESAREAN. Have the screen lowered at time of birth or baby held up for mother to see.   I would like to (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treament.  Avoid a routine injection of pricoin after the eflivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have the baby corom-in after I have had some time to recover.  Have the baby corom-in after I have had some time to recover.  Have the baby corom-in after I have had some time to recover.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about bostp care.  Receive additional help with breastfeeding from the lactation con	_	Try to wait until I feel the urge to push before I am coached to start pushing (even if I am fully	
Use spontaneous pushing, and not be coached to push (unless I am not making progress).  Have an episiotomy rather than a tear.  Avoid an episiotomy unless required for the baby's safety. I would like to use: Perineal massage & support _ UMam compresses _ Stower delivery _ Panting/blowing Have a mirror available so I can see the baby's head when it crowns.  Touch the baby shead when it crowns.  Have my labor partner cut the cord or cut the cord myself.  Have the doctor cut the cord.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby paxamination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of piticin after the delivery to aid in expelling the placenta (unless it is needed to preven heavy bleeding).  Have the baby vine during the day, but in the nursery at night. I would like the baby brough to me at night if if an breastleeding.  Have the baby thin the nursery and brought to me upon request (or for breastleeding).  I would like to: (check all that apply)  Receive information about baby care.  Receive information about baby care.  Receive additional help with breastleeding from the lactation consultant.  I will receive postpartum care LOCATION	_	<u> </u>	
Avoid an episiotomy unless required for the baby's safety. I would like to use:    Perineal massage & support   Warm compresses   Slower delivery   Panting/blowing	_		
Avoid an episiotomy unless required for the baby's safety. I would like to use:    Perineal massage & support   Warm compresses   Slower delivery   Panting/blowing	_	Have an episiotomy rather than a tear.	
Have a mirror available so I can see the baby's head when it crowns.  Touch the baby's head when it crowns.  Have my labor partner cut the cord or cut the cord myself.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby partner cut the cord.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have the baby room-in and be with me at all times.  Have the baby room-in and be with me at all times.  Have the baby room-in and the have had some time to recover.  Have the baby room-in and the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Avoid an episiotomy unless required for the baby's safety. I would like to use:	
Have my labor partner cut the cord or cut the cord myself.  Have the doctor cut the cord.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby examination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of piticin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if a ma breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to: (check all that apply)  Receive information about baby care.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION			
Have the doctor cut the cord.  Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby examination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby voith me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  Pischarge  Discharge  Receive information about baby care.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION	_	Touch the baby's head when it crowns.	
Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.  Have the baby examination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  After Birth  After Birth  After Birth  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of piticsin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in after I have had some time to recover.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION	_	Have my labor partner cut the cord or cut the cord myself.	
Have the baby examination and initial care done on my abdomen.  Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitcoin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to: (check all that apply)  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION	_	Have the doctor cut the cord.	
Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).  Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitcoin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby circumcised at the hospital.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have the baby placed immediately on my stomach/chest before being cleaned and wrapped.	
Hold the baby for minutes before he/she is taken away for examinations or bath.  Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumdised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastleeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to: (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have the baby examination and initial care done on my abdomen.	
Have the baby examined, cleaned, and wrapped before I hold him/her.  CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in after I have had some time to recover.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Delay non-essential routines and treatments for the baby (e.g. eye treatment, etc.).	
CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.  CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to: (check all that apply)  Receive information about baby care.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Hold the baby for minutes before he/she is taken away for examinations or bath.	
CESAREAN: Avoid a cesarean section unless absolutely necessary.  CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to: (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to: (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have the baby examined, cleaned, and wrapped before I hold him/her.	
CESAREAN: Have my labor partner present at all time during a cesarean.  CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.  I would like to (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		CESAREAN: Be fully informed and participate in decision making if cesarean is indicated.	
After Birth  I would like to (check all that apply)  Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		CESAREAN: Avoid a cesarean section unless absolutely necessary.	
After Birth    I would like to (check all that apply)		CESAREAN: Have my labor partner present at all time during a cesarean.	
Have my labor partner (or other person) accompany the baby if he/she requires medical treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		CESAREAN: Have the screen lowered at time of birth or baby held up for mother to see.	
treatment.  Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		I would like to: (check all that apply)	
Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it is needed to prevent heavy bleeding).  Have a male baby circumcised at the hospital.  Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION	After Birth		
Have the baby room-in and be with me at all times.  Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Avoid a routine injection of pitocin after the delivery to aid in expelling the placenta (unless it	
Have the baby room-in after I have had some time to recover.  Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have a male baby circumcised at the hospital.	
Have the baby with me during the day, but in the nursery at night. I would like the baby brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have the baby room-in and be with me at all times.	
brought to me at night if I am breastfeeding.  Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).  I would like to: (check all that apply)  Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have the baby room-in after I have had some time to recover.	
I would like to: (check all that apply)    Receive information about baby care.			
Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		Have the baby kept in the nursery and brought to me upon request (or for breastfeeding).	
Receive information about baby care.  Receive information about postpartum care for mother.  Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION		I would like to: (check all that apply)	
Receive additional help with breastfeeding from the lactation consultant.  I will receive postpartum care LOCATION	Discharge		
I will receive postpartum care LOCATION	-	Receive information about postpartum care for mother.	
		Receive additional help with breastfeeding from the lactation consultant.	
		I will receive postpartum care LOCATION	
, , , , , , , , , , , , , , , , , , , ,		Baby will receive care LOCATION	