



## LOCAL ANTENATAL COURSES FOR LOCAL PEOPLE

### **Birth wish list**

The following list gives you some ideas of what to include in your birth plans. You should be as flexible as possible and try and consider all the different options you may face in your labour and early parenting experiences.

### **Birth Companion**

- Who do you want with you to support you through labour?
- Do you want your partner or a member of your family or friend?
- Will you have a Doula or an independent midwife with you?
- Do you want your support person/s to stay with you all the time or do you want them to leave at certain times?
- Do you want to be alone with your birth supporter?

### **Environment**

Consider how you want the:-

- Music
- lighting
- Ventilation
- Position of the bed

What do you need to make the environment more comfortable?

- Birth ball
- Mats
- Pillows
- Cushions
- Blankets from home
- The things you want to bring with you from home

### **Positions**

What positions do you want to adopt in labour, do you want to;

- Move around freely
- Be upright and mobile
- Be on the bed

What position do you want to give birth in?

- all fours
- Squatting.

### **Monitoring of self and baby**

How would you like your baby to be monitored during labour?

- Electronic fetal monitoring
- Doppler

Do you want vaginal examinations during your labour or would you prefer for



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intervention to be kept to a minimal.

### **Pain Management**

#### **DO you want to use**

- Natural methods of dealing with pain
- Massage/ aromatherapy/ breathing/ moving
- Gas and air
- Breathing
- Epidural
- Pethidine
- Water
- tens

Do you want to use a bath or the birthing pool for Pain relief? If you choose to use the latter do you want to deliver in the birthing pool?

Remember to build into your plan several different methods of pain management in case you find it hard to cope with your first choice.

### **Second stage**

Do you want to be told and coached to push or do you want to be guided by your body.

Would you prefer to tear or have an episiotomy?

### **Third stage**

Do you want a natural third stage?

Do you want a managed third stage?

If you are advised that a natural third stage is not possible do you want to delay cutting the cord until it has stopped pulsating and then have the injection?

### **Baby**

How would you like your baby delivered?

Would you like the lights turned down and the room quiet when baby is ready to be born?

Do you want baby delivered straight on to you for a cuddle with any checks done while baby is on you? Or do you want baby to be cleaned up first?

Does your partner want to cut the cord?

Do you want time on your own with baby and partner before being transferred to the postnatal ward?

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Do you want your baby to have vitamin K by injection or orally?

### **Feeding**

How do you want to feed your baby?

Do you want to try and breastfeed straight away?

Remember to make it clear if you don't want your baby to receive any formula in its first few hours.

### **Unexpected events**

Write your birth wish list outlining the birth you want then build into it what you want to do if there are unexpected events. You need to state whether you wish to avoid certain procedures if however they are unavoidable you need to write in your birth plan how you wish for them to proceed.

Examples

If your labour is progressing slowly and it is suggested that your waters are broken or that you should have a syntocinon drip. Put in your birth plan how you feel about these procedures and what you would like to happen if they are suggested i.e. that you would like all the risks and benefits explaining and would like to be given time to make your decision and try alternatives, such as changing position, moving around, being left alone with my partner for some private time and cuddles or going for a walk etc.

In the event of an assisted delivery. Explain again that you would like all the risks and benefits explaining along with the possible outcomes and ask to have some time to try the alternatives.

If a caesarean is suggested make it clear in your birth plan that you want to have a full explanation of the reasons, risks and benefits of such a procedure. Use your caesarean birth plan notes to explain how you would like the operation to proceed to make it special for you.

Consider in your birth plan what you would like to happen if baby has to go to special baby care including whether you would like to go with him or whether you want your partner to remain with baby.

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### Birth plans

#### Beth and Jonathan hospital birth plan

We have attended antenatal classes and a workshop at the Active Birth Centre, and I would like to try to have as active and natural a birth as possible. Despite my high hopes, though, I am keeping an open mind as to pain relief as I can't be sure how I will cope with the pain.

#### Birth companions:

Husband Jonathan (known as Jo) and acupuncturist Alison or, if Alison can't make it, Judy .

#### Early labour and first stage:

I am planning to cope at home for as long as possible before we come into hospital; we have a TENS machine.

If we arrive in hospital before I am 5cm dilated, I plan to continue using the TENS machine, as well as breathing techniques and a variety of different positions. I'd like to try and rest for as long as possible until labour is established. But, if I want to lie down, please encourage me to stay off my back.

Once labour is established, I hope to use acupuncture as my main source of pain relief and stress relief. However, I would also like to use the hospital's waterpool if it is available; acupuncture can be administered while I'm in the pool if necessary.

I would like the baby to be monitored using a sonicaid where possible rather than a strap-on monitor, which could prevent me moving around.

I would like labour to go at its own pace as much as possible. For example, assuming the baby is not in distress, I would prefer not to have my waters broken or be given syntocinon to speed things up. If the baby appears to be poorly positioned or labour is not progressing well for some reason, I would appreciate it if you could suggest changes of position or movements that might help before any recourse to drugs is taken.

#### Pain relief in first stage:

I hope to manage using only Gas And Air, and would appreciate your encouragement to avoid other drugs.

Please don't offer me an epidural. If I want one, I'll ask for it! However, I would like to be encouraged to make it through two or three more contractions from when I first request an epidural. I would also like to

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be examined immediately before the epidural is applied in case I am nearly ready to push by then.

If an epidural becomes necessary, I would like a mobile epidural if possible.

If an epidural slows down labour, I would like to attempt to change positions as much as possible before being given a syntocinon drip. For example, I would like to try being on my side or on all fours, or in a well supported squat, in order to keep the pelvis well open and keep labour moving on as it should.

Under no circumstances at all do I want pethidine or diamorphine. This is not negotiable!

### **Transition:**

I understand that it's normal for women in the transitional stage to behave irrationally and no longer feel that they can cope. If this happens to me, I would like to have as much encouragement and emotional support as possible rather than being given pain relief or hormones at this stage.

I understand that it is not unusual for labour to appear to 'stop' for up to an hour between first and second stages. Assuming the baby is not in distress, I would like to avoid any drugs at this stage, and simply let my body get on with it at its own pace.

### **The birth:**

Ideally I will get out of the pool before the birth; I would like to give birth in an upright/kneeling/supported squatting/all-fours position to give the baby maximum space to descend through my pelvis. I do not want to be on my back or semi-reclining.

If the baby appears stuck and we need to use a ventouse or forceps, I would like to try using the 'drop squat' position for a few pushes first, assuming the baby is not in distress.

If I have had an epidural, I would still like as much help as is possible to keep off my back, perhaps being on my side or on all-fours.

### **Third stage:**

I would prefer to syntometrine to help with the delivery of the placenta. However, if I have made it through the birth without any drugs, I would like to have a natural third stage.

If I do have a natural third stage, please do not clamp the cord until it has stopped pulsating, unless its position is a risk to the baby.

Please offer my husband the opportunity to cut the cord if possible, although he may not want to!

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### After the birth:

I would like the baby to be delivered onto my stomach and to breastfeed him/her as soon as possible after the birth - I don't mind being given a bloody baby! I would like to breastfeed the baby as soon as possible after the birth, and keep him/her unclothed if this is appropriate, to maximise skin-to-skin contact..

Repair of the perineum, if necessary: I would prefer to avoid having stitches if possible, so if you think any tear will heal without stitches please let me know.

### Other:

I agree to a single student doctor, nurse or midwife being present at the birth. However, I would like their role to be kept to one of observer rather than active participant.

If labour is simply taking a long time but my baby is not in immediate danger, please would you encourage me to keep going and perhaps to try changes of position or movements that might help.

If a caesarean section becomes necessary, I would prefer to remain awake with epidural or spinal block anaesthesia. I would like to breastfeed the baby as soon after birth as possible. If I have to have a general anaesthetic, I would still like the baby to be put to my breast as soon as it is born, if this is feasible while I'm still asleep.

### Baby feeding:

I plan to breastfeed and am looking forward to it! If I have trouble breastfeeding I would greatly appreciate the help of a midwife who is fully supportive of breastfeeding, and would also like to be given contact details for local breastfeeding counsellors.

If for any reason the baby needs to be fed not from my breast, I would appreciate it if a cup or spoon could be used over a bottle, if possible.

### Going home:

I would like to go home as soon after the birth as possible - particularly if it's Christmas Eve or Christmas Day!.

### Louise's birth plan

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- I would like my husband, Joe, to be with me throughout the labour.
- I'd like the labour to be as drug-free as possible- using homeopathy, hot baths, gas and air, breathing techniques and my tens machine to get me through it.
- I'd like to stay as mobile as possible and would appreciate midwife support and guidance with breathing and positions. Ideally I'd like to be upright for the delivery.
- However, I am open to having an epidural if I can no longer bear the pain! I don't want to have pethidine.
- I don't want to receive continuous monitoring unless absolutely necessary.
- I'd like the baby to be delivered onto my tummy for a cuddle before he or she is cleaned. And ideally, I'd like to breastfeed as soon as possible. Joe would like to cut the cord.
- I'm okay receiving an episiotomy for fetal distress/surgical delivery but otherwise would prefer to tear.
- I don't want a Caesarean but if I have to have one, I want Joe to be with me.
- Vitamin K - I'm happy for my baby to receive this.