

Personalised birth preferences

A birth plan supports you (and your birth partner/s) to make informed decisions about your care in labour. Sharing your preferences with your care providers enables them to personalise the care they give you. Questions 1 to 17 relate to information found in the **Birth** section.

Please read the content and explore the links prior to completing. Work your way through the questions at your own pace. Save, then print or show to your midwife from 34 weeks onwards.

This personal care plan should be written in consultation with a healthcare professional, especially if you have an underlying health condition (such as diabetes) or have developed a pregnancy-related condition (such as pre-eclampsia).

My birth preferences

1. I am aware of my three choices of birth setting (home, birth centre and labour ward) and have had a discussion with my midwife/doctor about which option is recommended for me. I would prefer to give birth:

- at home
- in a birth centre
- in a labour ward
- I prefer to wait and see
- I am not sure/I would like to find out more.

Certain options might be recommended for you based on your personal health and pregnancy.

My thoughts, feelings and questions ...

2. My birth partner(s) will be:

Think of up to two people that you would like to have with you during labour.

My thoughts, feelings and questions ...

3. Student midwives/doctors may be working with the team when I have my baby. Tick the comment that applies to you:

- I am happy for a student to be present during my labour/birth
- I prefer that no students are present during my labour/birth
- I prefer to wait and see
- I am not sure/I would like to find out more.

Students work closely alongside a supervised midwife and will provide you with care and support under supervision, with your consent.

My thoughts, feelings and questions ...

4. I have additional requirements. Tick the comment that applies to you:

- I will need help to translate into my language
- I have allergies and/or special dietary requirements
- I have religious beliefs and customs that I would like to be observed
- I/my partner have additional needs.

If you have any special requirements, please tell your maternity team as early as possible. Use of interpreting services will vary depending on local policy and availability, please discuss with your midwife.

My thoughts, feelings and questions ...

5. I have had a discussion with my midwife/doctor about how I would like to give birth.

The majority of women will have a vaginal birth, however for some a caesarean birth may be recommended.

My thoughts, feelings and questions ...

If you are having a planned caesarean birth please go to Q.15

6. In some circumstances, your midwife or doctor may recommend starting your labour artificially, instead of waiting for it to start naturally (this is known as induction of labour). Tick the comment that applies to you:

- I am aware of why an induction might be recommended
- I am not sure/I would like to find out more.

If you go 10 or more days past your estimated due date, you have certain medical conditions, or your doctor is concerned about the health of your baby you may be offered an induction of labour. This will be planned carefully with your midwife/doctor.

My thoughts, feelings and questions ...

7. During labour and birth I would consider the following coping strategies/pain relief. Tick the comment that applies to you:

- | | |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="radio"/> I prefer to avoid all pain relief | <input type="radio"/> gas and air (entonox) |
| <input type="radio"/> self-hypnosis/hypnobirthing | <input type="radio"/> pethidine/diamorphine/meptid (opioid injection) |
| <input type="radio"/> aromatherapy/homeopathy/reflexology | <input type="radio"/> epidural |
| <input type="radio"/> water (bath or birthing pool) | <input type="radio"/> I prefer to wait and see |
| <input type="radio"/> TENS machine (transcutaneous electrical nerve stimulation) | <input type="radio"/> I am not sure/would like to find out more. |

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Your options for pain relief will depend on where you plan to give birth. Discuss with your midwife and ask what options are available to you at your local maternity unit.

My thoughts, feelings and questions ...

8. During labour and birth I would consider using the following options to help me:

- massage
- walking/standing
- different upright positions such as all fours/squatting/kneeling
- a birthing ball
- bean bags, birth stools and birth couches if available
- a birthing pool
- a bed, for rest – propped up with pillows or whilst lying on my side
- music to be played (which I will provide)
- the lights dimmed
- my birth partner taking photographs/filming
- I prefer to wait and see
- I am not sure/I would like to find out more.

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Your circumstances in labour may influence what choices are available to you. Please discuss this with your midwife at 34-40 weeks.

My thoughts, feelings and questions ...

9. During labour and birth, it is recommended that your baby's heartbeat is monitored. Tick the comment that applies to you:

- I prefer to have intermittent fetal heart rate monitoring with a handheld device
- I prefer to have continuous fetal heart rate monitoring using a CTG machine
- if I need continuous monitoring I would like to be mobile and use wireless monitoring if available
- I prefer to wait and see
- I am not sure/I would like to find out more.

You can learn more about fetal monitoring by reading the content.

My thoughts, feelings and questions ...

10. During labour, your midwife and/or doctor may recommend vaginal examinations to assess the progress of your labour. Tick the comment that applies to you:

- I am aware of why vaginal examinations are part of routine care
- I prefer to avoid vaginal examinations if possible
- I prefer to wait and see
- I am not sure/I would like to find out more

Vaginal examinations are a routine part of assessing labour progress and will not be undertaken without your consent.

My thoughts, feelings and questions ... _____

11. In some circumstances, your midwife or doctor may recommend interventions to assist with your labour. Tick the comment that applies to you:

- I am aware of why assistance/intervention might be recommended
- I am not sure/I would like to find out more

Interventions may be recommended if your labour slows down, or if there are concerns with you or your baby's health.

My thoughts, feelings and questions ... _____

12. In some circumstances, your maternity team may intervene by recommending an assisted or caesarean birth. Tick the comment that applies to you:

- I understand why an assisted birth might be recommended
- I am not sure/I would like to find out more.

An assisted or caesarean birth may be recommended if it is thought to be the safest way to deliver your baby; your doctor will discuss this with you and ask for your consent before any procedure is undertaken.

My thoughts, feelings and questions ...

13. In some circumstances, your midwife or doctor may recommend a cut to the perineum to facilitate birth (episiotomy). Tick the comment that applies to you:

- I understand why an episiotomy might be recommended
- I prefer to avoid an episiotomy
- I am not sure/I would like to find out more.

An episiotomy may be recommended for an assisted birth or if your midwife/doctor is concerned that your baby needs to be born quickly. Your midwife/doctor will always ask for your consent.

My thoughts, feelings and questions ...

14. After your baby is born, your placenta will be expelled (this is known as the third stage of labour). Tick the comment that applies to you:

- I would like to have a natural (physiological) third stage, the cord is left intact and I push the placenta out myself
- I would like to have an active third stage, where the cord is cut after a few minutes and I receive an injection of oxytocin, the midwife/doctor delivers my placenta
- I prefer to wait and see
- I am not sure/I would like to find out more
- I/my birth partner would like to cut the umbilical cord
- I prefer the midwife/doctor to cut the umbilical cord.

Your midwife or doctor may recommend an active third stage due to your personal circumstance and will discuss this with you at the time of birth.

My thoughts, feelings and questions ...

15. Skin-to-skin contact with your baby - immediately after birth - is recommended for all. Tick the comment that applies to you:

- I understand why skin-to-skin contact is recommended
- I would like immediate skin-to-skin contact
- I prefer to wait and see
- I am not sure/I would like to find out more.

As long as you and your baby are both well, skin-to-skin can be done following any type of birth. Your partner can also have skin-to-skin contact with your baby.

My thoughts, feelings and questions ...

16. I am aware that I will be provided with support to feed my baby. Add my thoughts around feeding in the text box below.

During pregnancy you will have a chance to discuss infant feeding, this will include information about the value of breastfeeding. A midwife will help you to get feeding off to a good start as soon as your baby shows cues that he/she is ready to feed.

My thoughts, feelings and questions ...

17. After my baby is born, he or she will be offered Vitamin K.
Tick the comment that applies to you:

- I would like my baby to have Vitamin K by injection
- I would like my baby to have Vitamin K by oral drops
- I do not want my baby to have Vitamin K
- I am not sure/I would like to find out more.

Vitamin K is a supplement that is recommended for all babies that prevents a rare condition known as Vitamin K Deficiency Bleeding (VKDB). The Vitamin K supplement has no known side effects.

My thoughts, feelings and questions ...