



Birth Wish List

Routine Part of a Birth with LCM

(Under normal circumstances)

- Movement & Position changes
- Use of soaking tub
- May drink clear liquids & eat in labor
- Touch, massage, relaxation
- Quiet room/music if desired
- Low lights
- Push/deliver in any position that works
- Baby delivered to Mom's tummy
- Delayed Cord Clamping
- Active management of 3rd stage (see handout)

NON-Routine events with LCM

(Only if medically needed, we'll discuss)

- Continuous electronic fetal monitoring (we use intermittent)
- IV
- Inducing/augmenting labor with Pitocin
- Breaking the bag of waters
- Offering pain medicine/epidural
- Episiotomy
- Vacuum/forceps delivery
- Cesarean section

Name: _____ DOB: _____

My support people will be: _____

Special requests and concerns about me and my care:

- It is important to me to do everything possible to have an un-medicated birth. Please don't offer medication; if I want to change my mind, I will ask.
- I am interested in an un-medicated birth experience but flexible. I'm not sure what I will choose in labor, or how things will go -- Let's wait and see.
- My preference is an epidural for labor and delivery.
- I realize a two-night stay after a vaginal birth is routine, but I will probably ask for the 24-hr discharge option, if I tested GBS negative and the pediatricians will discharge my baby.
- I think I will probably stay in the hospital the full two nights after my baby's birth.

CNM initials: _____

About the Baby:

- Babies are delivered to mom's tummy and may breastfeed as soon as they are ready.
- We will defer any non-urgent procedures for the first hour if requested.
- NO vaccines or medical procedures are done without parents' consent.
- Babies stay with their moms for examinations and baths.
- Rooming-in is routine.
- Lactation support is available as needed, every day.
- Eye ointment and Vitamin K injection are mandated by the VA Department of Health and given in the first hour of life. Parents can refuse either if they sign a waiver.
- If your baby's doctor does not come to this hospital, the in-house pediatrician will care for your baby until you go home.

My partner _____ would like to cut the cord: Yes No
Name

- Please collect cord blood for stem cells; we are banking with _____.
- I decline eye ointment for my baby.
- I have read about the risk of Hemorrhagic Disease of the Newborn in babies that do not receive Vitamin K. Despite this risk, I decline the Vitamin K.
- I have a history of breast surgery or serious breast issues and need special lactation support for this.
- Regarding circumcision for a boy: Yes, please No, thank you
- My baby's doctor is _____.

Special requests and concerns about my baby:

Patient Name (Print): _____

Signature: _____