University of Missouri Women’s and Children’s Hospital Birth Preferences

Your name: __________________________

Your due date: __________________________

Your health care provider: __________________________

During labor and delivery, our top priority is the safety and health of you and your baby. We try to accommodate personal preferences for a positive labor and delivery experience.

If we find a change needs to be made in the interest of either you or your baby’s health, we will discuss it with you and your support team. (Please bring your birth preferences with you to the hospital.)

Please complete this birth preference and review it with your health care provider at your next prenatal visit.

Keep this plan in your hospital bag to review with your labor and delivery nurse at the hospital when you are admitted.

The top 3 things that are most important to me during my labor and delivery experience are:

1) ________________________________________

2) ________________________________________

3) ________________________________________

Childbirth preparation
We attended or plan to attend the following classes (please check all that apply):

☐ Beginning or refresher childbirth class
☐ Family Birth Center tour
☐ Sibling class
☐ Infant safety and CPR class
☐ Breastfeeding class
☐ Attended class with previous pregnancy
☐ No classes
☐ Other, please specify_____________________________________

Environment
In my labor, I would prefer (please check all that apply):

☐ Dim lights
☐ Quiet
☐ To bring my own music
☐ To use my own pillows (bring a brightly colored pillow case)
☐ Support persons (up to 5 visitors during labor and 3 visitors during delivery are permitted as safety allows)
☐ Other, please specify_____________________________________

Labor
If safe, I would like to be able to do the following during labor (please check all that apply):

☐ Drink clear liquids
☐ Sit in a rocker in labor
☐ Eat ice chips
☐ Use the shower
☐ Use heat/cold massage
☐ Use a birthing ball
☐ Other, please specify_____________________________________

Support team
In the first stages of labor, we allow 5 visitors.

☐ I would like the following people to be in my room during the first stages of labor: ______________________________________

In the pushing phase of labor, we allow 3 visitors.

☐ I would like the following people to be in my room during the pushing phase of labor: ______________________________________

☐ I plan to have a doula or midwife help me (name and contact information are):

__________________________________________

__________________________________________

Monitoring
I understand that some form of fetal heart rate monitoring in labor is recommended (please check one):

☐ I prefer continuous electronic fetal monitoring during labor
☐ I prefer intermittent electronic fetal monitoring during labor
☐ Other, please specify_____________________________________

Pain relief options
I am interested in the following pain relief choices (please check all that apply):

☐ Breathing techniques
☐ Massage
☐ Acupressure
☐ Heat/cold
☐ Family/friend support
☐ Imagery
☐ Shower therapy
☐ IV medications
☐ Epidural anesthesia
☐ Other, please specify_____________________________________
Labor stimulation
If it becomes necessary to stimulate my labor, I prefer to (please check one):
- First, try methods that do not involve medications, such as artificial rupture of membranes and position changes
- Accept any methods to start or improve labor including medications

Special circumstances
There are a few practices that you may have read about in books or on the Internet. Not all providers support these practices. If any of these are of interest to you, please discuss them with your provider.
- I prefer to walk in my room or in the halls during labor
- I prefer to have a saline lock instead of running IV fluids during labor
- Due to my religious or cultural beliefs, I would like to have providers who are:
  - Female only
  - Male only

Religious requests
- I would like to have a birth blessing performed by one of the hospital chaplains
- I would like to receive communion or the Eucharist
- I plan to have my own clergy visit us in the hospital
- Other, please specify__________________________

Birth
I prefer to (please check all that apply):
- try different positions for pushing and birth, such as (please check all that apply):
  - squatting
  - be on my hands and knees
  - lie on my side
  - lie on my back
  - use the foot rests or stirrups during delivery
  - have a mirror set up to see the birth
- wait at least 60 seconds after delivery before cutting the cord
- have the umbilical cord cut by:
  - My partner
  - Me
  - Health care provider
- see the placenta after it is delivered
- take the placenta home
- collect cord blood
- Other, please specify__________________________

Episiotomy
I would prefer (please check one):
- to tear rather than have an episiotomy
- to have an episiotomy rather than tear
- to try the following to lessen the need for an episiotomy (please check all that apply):
  - warm compresses
  - perineal massage
  - positioning

Newborn care immediately after delivery
After delivery, if your baby is stable, he will be dried with a warm blanket and placed on your chest. This is a special time in which we will help you get comfortable, monitor your baby's transition to this new world, and help you both get to know each other. We encourage you to discuss this important time with your family and friends prior to coming to the hospital, and limiting visitors until an hour after your baby's birth.

I would like the following visitors to be allowed into my room during my labor, delivery and immediate postpartum time:

If your baby is stable, the baby will be dried with a warm blanket after delivery and placed on your chest. This skin-to-skin contact helps your baby stay warm, feel calm and breathe better. We will keep your baby against your skin for the first hour of life or until after the first feeding is complete. I would like to:
- Have my baby placed in this skin-to-skin position
- Delay skin-to-skin contact for the following reason:

Newborn Care
After delivery, the baby will have a small amount of antibiotic ointment placed in the eyes. The state of Missouri mandates that this ointment is placed in every baby's eyes.
- I understand that the eye ointment is a state law and that this will be placed in my baby's eyes after delivery.
- I do not want the eye ointment placed in my baby's eyes and have a court order saying that the University will not use this treatment on my baby.

After delivery, the baby will receive an injection of vitamin K. This prevents bleeding, including bleeding into the brain which can cause life threatening brain damage.
- I understand that my baby will be given an injection of vitamin K after delivery. I want this injection to be performed while my baby is skin-to-skin to decrease any discomfort that he may experience.
- I understand that my baby will be given an injection of vitamin K after delivery. I do not want my baby to be skin-to-skin during the injection.
- Other, please specify__________________________
After delivery, the bath is delayed by several hours. When babies are washed, their temperature falls, and this can stress out a new baby. The bath is usually performed in your postpartum room by the mother and her partner.

- I would like the bath delayed for at least four hours.
- I would like something different for my hospital stay.

**Rooming in**
Research has shown that mothers and babies do best when they stay together during their hospital stay. Because of this, our hospital allows our babies to room in with their mothers. We will support both you and your baby while in the hospital and use every opportunity to teach you how to care for yourself and your new baby. If needed, we have a newborn observation unit for those special circumstances when babies need to be away from their mothers.

- I like this opportunity to keep my baby with me while I am in the hospital.
- I would like something different for my hospital stay.

**Infant feeding**

- I plan to breastfeed my baby
- I prefer my baby not receive any sugar water or formula unless I give permission
- I plan to pump breast milk and bottle feed my baby
- I would like to both breastfeed and formula feed my baby
- I have not yet decided about my chosen feeding method and would like more information
- I plan to formula feed my baby

**Pacifiers**
Because pacifiers can impact breastfeeding during the first weeks of life, we no longer provide pacifiers for well babies in our hospital. We do encourage pacifier use after breastfeeding is well established - when baby is gaining weight and is able to latch without difficulty. This is usually when your baby is around three to four weeks old. Pacifiers are encouraged for some babies in the newborn intensive care unit (NICU).

- I would prefer my baby not to be given a pacifier while in the hospital
- I would like to bring my own pacifier from home for my baby to use while in the hospital

**Circumcision**

- I do not plan to have my son circumcised
- I plan to have my son circumcised
- I have not yet decided if circumcision is right for my son and would like more information.

**Visitors and support people**

- I would like my partner to spend the night in my room
- I would like to have my visitors limited. Please allow only the following people to visit us (please list):

**Sibling visitation:** Children visiting the hospital should have an adult other than the new mom to care for them. I would like to have my other child(ren) visit:

- During labor
- During the birth
- As soon as possible after delivery
- After I arrive in my postpartum room, if applicable
- I do not plan to have my other child(ren) visit us in the hospital
- Not applicable

**Support after discharge**
When I am discharged from the hospital, I will go to:

- My home
- A relative's home
- A friend's home

The following people will be helping me out at home for the first few days (please list):

The one request in this plan that is important to me is:

Other questions for my provider:

I would like to have the hospital staff arrange for a home health visit after I go home:

- yes
- no

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Additional requests:

Women's and Children's Hospital

Resources/phone numbers

• Breastfeeding classes (573) 499-6101
• Breastfeeding clinic – provides breastfeeding consultations by a certified lactation consultant at the South Providence Pediatrics clinic (573) 882-4730
• Breastfeeding questions after clinic hours, call postpartum at Women's and Children's Hospital (573) 875-9450
• Childbirth classes (573) 499-6101 or www.muhealth.org/ChildbirthClasses
• Classes are held the 3rd Monday of each month at Women's and Children's Hospital
• Infant CPR (573) 445-9411
• Labor and Delivery (573) 499-6110
• OB triage center (573) 499-6100
• Safe Kids - safety check for car seats (573) 884-3660

Pediatricians and Family Medicine physicians/clinics in Columbia

• South Providence Pediatrics clinic (573) 882-4730
• South Providence Family Medicine clinic (573) 884-7733
• UP Woodrail General Internal Medicine/Pediatrics clinic (573) 884-2356
• UP Keene Family Medicine clinic (573) 882-8000
• UP Smiley Lane Family Medicine clinic (573) 884-8980
• City of Columbia Family Health Center (573) 214-2314

Family Medicine physicians/clinics outside Columbia:

• Fulton - Callaway Physicians (573) 642-5911
• Fayette – UP-Fayette Medical clinic (660) 248-2217

Breastfeeding resources

• National Breastfeeding phone line with peer counselors is available 24/7 at (800) 994-9662
• WIC provides peer breastfeeding educators as well as breast pumps (573) 874-7384

Online breastfeeding resources

• www.kellymom.com
• www.lalecheleague.org
• www.womenshealth.gov

Pregnancy resources

• National Tobacco Quit Line (800) 784-8669 or (800) QUIT NOW
• National Domestic Violence hot line (800) 787-3224 or (800) 799-SAFE

Books

• "ACOG Your Pregnancy and Childbirth: Month to Month"
• “What to Expect when you’re Expecting” by Eisenberg, Murkoff, and Hathaway

Other online resources

• www.womenshealth.gov/pregnancy/index
• From the office on women’s health www.parenting.com
• From the authors of “Parents” magazine a Week-by-week development guide with pictures. www.babycenter.com
• Tools, message boards, blogs www.whattoexpect.com
• From the authors of “What to Expect When You’re Expecting” www.thebump.com
• Free downloadable apps The Bump and Pregnancy Buzz by The Knot
• WebMD Pregnancy by WebMD
• My Pregnancy Today by BabyCenter
• What to Expect Pregnancy Tracker by WhattoExpect.com