

Name: .....

Due date: .....

Name(s) and contact numbers of birth partner(s):

.....

.....

## My Birth Plan

### Birth companion

Who will be your birth partner?

.....

Do you want them with you at all times?

.....

What relationship are they to you?

.....

### Positions for labour and birth

Do you want to be mobile for as long as possible?

.....

Do you want to give birth kneeling/squatting/standing/in bed?

.....

### Pain relief

Do you want any?

.....

Which forms of pain relief would you prefer and in what order?

.....

.....

### Birthing pool

Do you want to use one?

.....

Do you want to use it for pain relief and/or to give birth in?

.....

## **Delivery of the placenta**

Do you want to deliver it naturally if possible?

.....

Would you rather have an injection to reduce the risk of bleeding?

.....

Do you want students observing or helping?

.....

## **After the birth**

Do you want your baby to be given vitamin K?

.....

Would you like to have skin-to-skin contact?

.....

## **Feeding your baby**

Once your baby is born, how do you want to feed them him/her?

.....

If you plan to breastfeed, does that mean you don't want your baby to have any bottles at all?

.....

## **Special needs**

Do you have any particular needs? E.g. religious, dietary or disability requirements.

.....

## **Unexpected situations**

What do you want to do if your baby has to go to a special care baby unit?

.....