

Birth Plan



MATERNITY AND OBSTETRICS SERVICE
Hospital Universitari Arnau de Vilanova de Lleida

my details

Name and surname:

Baby's name and surname:

Woman's label with hospital number

Introduction

Our hospital's main objective is to deliver care with respect according to your needs, providing care during the intrapartum and postpartum period, with the aim of keeping you and your baby safe. With this birth plan document, together with your birthing partner, you can let us know your preferences, wishes and expectations towards the care you would like to receive in the labour and the delivery of your child, becoming an active part in your labour.

A birth is a flexible document which we will try to respect as long as it is possible. Nevertheless, you should bear in mind that we may have to change our interventions due to any deviation from normality or unexpected event throughout the labour, always personalizing and providing information.

We would like to thank you for the trust you have placed in our hospital and the Obstetric Team, and for choosing us to provide care in the stages of your labour.



Care during labour

Preferences related to the birthing partner:

You can have one companion to provide you with support. In order to preserve your privacy and the privacy of the other women in labour, swapping the birthing partner must be avoided.

You will be supported by a midwife, who will be your named midwife, and will assist you throughout the process of labour. The midwife will be in touch with the multidisciplinary team (obstetricians, anaesthetists and paediatricians) who will safeguard your wellbeing.

During the stages of labour I would like:

- To have a birth partner (name and surname):
Relationship:
- Not to have a birth partner
- To decide it when the labour starts

Preferences related to the environment

Our hospital has individual rooms in the maternity ward, 8 boxes in the labour ward (sala de dilatació), 2 delivery rooms (paritoris) and a postpartum room.

As long as it is possible. I would like:

- To regulate the lighting
- To play my own music and use of other audio-visual equipment
- Other preferences:

Preferences related to comfort measures and equipment

- | | |
|---|---|
| <input type="checkbox"/> Birthing ball | <input type="checkbox"/> Own music and headphones |
| <input type="checkbox"/> Birthing pool/shower | <input type="checkbox"/> Aromatherapy |
| <input type="checkbox"/> Hot water bottle | <input type="checkbox"/> Pillows and cushions |
| <input type="checkbox"/> Mirror | <input type="checkbox"/> Other preferences: |

To be noted: Shaving or administration of an enema is not routinely done, if you would like any of these, you should make a note in "other preferences" section.

Preferences related to the 1st stage of labour (dilatation stage)

I would like:

- To mobilise freely and to adopt different positions
- Vaginal examinations to be performed by the same staff member (if possible). If the vaginal examination have been done by another staff member due to second opinion or teaching purposes, I would like to be informed
- To drink water or isotonic drinks
- To respect the integrity of the amniotic sac (waters)

You will be informed all of the procedures/interventions that might be carried out during your labour

Types of fetal auscultation

- Continuous Intermittent* I do not mind

*** I understand the need of continuous auscultation in the event of oxytocin administration, epidural analgesia or when clinically indicated.*

Preferences related to drug/medication administration

At the start of the labour we will insert an intravenous line in case it is required to administer medication at any stage. If labour carries on without complications, the intravenous line will remain sealed.

If drug administration was needed, you will be informed of its purpose.

Pain relief preferences

- Non-pharmacological measures (heat, pool, massages, positional changes, breathing techniques, relaxation techniques...)
- Pharmacological techniques (epidural, which requires a signed consent form)
- I will decide it depending on the progress of the labour
- Other preferences:

Preferences during the 2nd stage of labour (pushing stages)

- Only the essential staff members to be present, to preserve privacy and intimacy
- To choose the most comfortable position for the pushes
- To start pushing when I feel the urge of pushing
- To use the mirror to visualise the labour of my child
- If an episiotomy was required, I would like to be informed prior it is done
- To be able to play music during the birth
- Delay cord clamp, to cut the umbilical cord after it stops pulsating
- To donate the umbilical cord blood to the blood bank "Banc de Teixits de Catalunya" (allow one minute before the umbilical cord is clamped and cut)
- To donate the umbilical cord blood to the blood bank "Banc de Teixits de Catalunya" only if the cord has to be cut within the first minute due to clinical requirement
- My birth partner to be offered to cut the umbilical cord
- Other preferences

Preferences during the 3rd stage of labour (the birth of the placenta)

Based in current scientific evidence, the WHO (World Health Organization) advises to perform an active management of the 3rd stage of labour, using oxytocin to reduce the risk of a postpartum haemorrhage (PPH).

- I would like an active management of the 3rd stage (using oxytocin)
- I would like a physiological 3rd stage (spontaneous birth of the placenta), but I understand that this is not recommended
- I request my placenta to be returned to me (specific document to be signed beforehand)

Preferences during a caesarean section

- Skin to skin to be done in theatre/operating room, if the situation allows it
- My birth partner to do skin to skin with the baby if I cannot do it
- To listen to music during the surgery
- I would like to see my baby during the birth, if possible

Other preferences:

Newborn feeding

- I would like to initiate breastfeeding as soon as possible, ideally within the first 2 hours from the delivery
- I would like to feed my baby with artificial milk (formula)
- I do not wish my baby to be fed (with any kind of milk) without my consent

Care of the newborn

- I wish not to be separated from my baby within the first 2 hours of life
- In order to prevent the Haemorrhagic Disease of the Newborn (HDN), we recommend the administration of Vitamin K intramuscular injection within the first 6 hours of life. The intramuscular injection is the most effective route of administration.
- If my baby needs any tests or procedures, I would like them to be performed while he/she is on skin to skin with me (as long as it is possible)

→ **Bathing the baby within the firsts hours of life it is not done routinely**

- If bathing my baby was indicated, I would like to be involved (or my birth partner)

→ **In order to prevent the Haemorrhagic Disease of the Newborn (HDN), we recommend the administration of vitamin K intramuscular injection within the first 6 hours of life, because it is the most effective route of administration**

- I do not wish Vitamin K injection to be administered, I would like it to be administered orally but I understand that this is not the most effective route (a signed consent form is required).

Other needs

If you have other needs or preferences that are not mentioned in this birth plan, please make a note below:

I _____ ID number _____

I understand the content of this document, I have received all the information and I have chosen the options according to my wishes and preferences. I accept the conditions in order to receive care according to this birth plan and I accept my duty to respect the rules established in the hospital and to respect the health professionals. I reserve my right to change the decisions chosen in this document and I understand that my preferences may be modified according to the specific needs of the moment.

Place and date
Signature

Staff providing information
Staff professional number