

my birth plan

Name:
.....

Birth partners name(s):
.....

Doula's name:
.....

EDD:
.....

Other notes:
.....

ENVIRONMENT	PAIN RELIEF
MONITORING	POSITIONING
2ND STAGE	3RD STAGE

my birth plan

PREFERENCES

Vaginal exams: no/yes
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Cord clamping: delayed/wait for white/wait for placenta/lotus birth
.....
Placenta: keep/dispose/like to see but then dispose
.....
Immediate skin to skin: yes/no
.....
Undisturbed golden hour: yes /no
.....
Feeding: breastfeeding/bottle feeding/colostrum syringe feeding
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Vitamin K: none/injection/oral drops
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BACK UP PLANS

INSTRUMENTAL	INDUCTION
C-SECTION	TRANSFER