

Birth Preferences

Mother's Name: _____

Partner's Name: _____

Due Date: _____

Before Delivery

Atmosphere

- Dim lights
- Quiet room
- Music
- No students/interns
- Minimal interruptions
- Freedom of movement

During Delivery

- Mirror to see baby's head
- Grab/squat bar

Position preferences:

After Delivery

- Skin-to-skin contact
- Hand baby to partner
- Wipe baby down first
- Delayed cord clamping
- Umbilical cord cut by partner
- Umbilical cord cut by staff

Feeding

- Breastfeed/pump
- Bottle feed
- Lactation consultation

Pain Relief

- IV pain medication
- Nitrous oxide
- Epidural
- TENS
- Bath/shower
- Breathing techniques
- Please refrain from offering pain meds unless my partner or I request it.

Who's allowed in the room while pushing?

Corewell Coverage: MD Midwife

Medication

- Give all routine newborn medications
- Give only these medications:
 - Vitamin K
 - Hep B vaccine
 - Eye ointment

Who's allowed in the room during the first hour of baby's life?

What's important to me?

