

Patient Name _____ Date _____ Physician _____

This is merely a tool to promote discussion between you and your doctor, BEFORE you are in labor. You can complete a new “wish list” at any time. Please complete the list as best you can and bring it to your next appointment.

- | Yes | No | Maybe | |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Epidural |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Circumcision – done by ob on day 1 or 2 of term delivery after clearance by pediatrics, an optional procedure |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | IV narcotics for pain (can make mother and baby “drowsy”) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | IV (need the site put in, can hold off on fluids if desired) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Wear my own clothing |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Have as few people in room as possible |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Play my own music, shower in early labor, low/lights quiet, aromatherapy |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Use a mirror to see the baby’s head while crowning (I want to “feel” the baby’s head) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Dad cut cord |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Collect and save cord blood |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Save placenta (you may, but no proven benefit. Can have harm). Requires another person to immediately take it for processing after delivery |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Hold baby right away, skin to skin, and try breast feeding |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Exam timing and Pitocin*, and breaking the bag of waters, can augment labor |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Walk in early labor – some monitoring methods can help with this |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Use labor balls / changes in position |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Avoid episiotomy unless medically necessary |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | We massage the perineum during the second stage to reduce tearing |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Avoid vacuum/ forceps delivery unless medically necessary |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Avoid cesarean unless medically necessary |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Elective induction if you are a candidate (often chosen to plan your birth) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Second stage and pushing (we help coach the pushing stage and try positions that help you deliver. In some instances, baby can “labor down” without pushing if you have an epidural) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Induction for medical reasons/pregnancy risk factors such as high blood pressure, post dates (done for safety of mom and baby, and to reduce the very low but possible risk of stillbirth) |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Elective cesarean (pick date 39-40 weeks, natural cesarean where you hold the baby skin-to-skin and breast feed during surgery) |

** A word on Pitocin: a natural hormone that mimics your body’s labor. One third of labors have abnormalities- such as baby positioning & effectiveness of contractions. Labor abnormalities are more painful and exhausting to Mom and baby. Pitocin is used to correct these labor abnormalities in a safe and timely fashion. It is slowly given in a highly controlled fashion to mimic a normal, natural labor pattern. It is also used after delivery of the placenta to reduce the risk of hemorrhage post partum, a common complication even in the most low risk patient.*

Comments: _____