

Birth Plan

Patient: Naomi Sahlstrom
Date of Birth: []
Due date: Aug. 10, 2013

EMERGENCY PLAN: If in labor, or think it's labor...

Pee, drink water, bath, change position, breathe

- 1. Call Sanford hospital (605) 328-4600** Theresa, CNM
Time contractions started: How far apart? How long do they last?
Has water broken yet? Blood? Labor progressing very fast? **BREATHE!**
- 2. Follow instructions.** (If time, call and alert midwife Diane [phone #])
Take: Naomi's Phone, pregnancy journal, journal, water bottle, Naomi's driver's license/other ID
- 3. Go to Tracy hospital or other location to meet helicopter**
- 4. Airlifted to Sioux Falls** (Ben ride along if possible, otherwise drive asap)

CAREGIVERS

Theresa Buell, CNM, Sanford Women's Hospital Sioux Falls
Diane Adamski, Midwife, southwest MN
ONLY FEMALE DOCTORS, NURSES, STAFF AND CAREGIVERS PLEASE!!!

SUPPORT

Ben Sahlstrom (husband)
Optional - Melissa Sahlstrom (mother-in-law)

DECISION MAKING

Ben Sahlstrom has final say.
I trust Theresa Buell's and Diane Adamski's (if present) recommendations because they understand my desire for as natural a birth as possible under the circumstances. We also understand that if baby comes early it may not be possible to have all of our preferences met and we are willing to be flexible for the best interest of baby.

PRETERM LABOR

YES hold off labor at least until steroids for baby's lungs can be given/take affect
YES to corticosteroids/lung developing steroids to help baby's chance of survival
Talk to Ben or me about other medications to hold off labor, pain medications or other options
YES to resuscitation for baby and whatever life-saving techniques are necessary
SAVE MY BABY!!!!

LABOR

I like...

- Listening to soft music like spa or classical piano
- Low lighting
- Bath/shower/birthing pool – I like water!
- Freedom to move/position according to how I feel
- Eat and drink if I want
- Stay hydrated by drinking fluids rather than IV, no IV port unless necessary
- Being coached for breathing/relaxation techniques
- Walk around as I wish/be free to use the bathroom
- Intermittent fetal monitoring rather than constant
- Be coached on when to push and for how long
- Be allowed to progress free of stringent time limits as long as my baby and I are doing fine

DELIVERY

I would like a vaginal birth as natural as possible, with no pain medications (no epidural), and Ben with me at all times. Water birth would be ideal.

Female doctors and staff only (male doctors fine for care of baby)

- Please do not ask if I want an epidural or other pain meds. I am committed to a natural non-medicated birth.
- Minimal internal exams
- A natural vaginal delivery is very important to me. I would like to exhaust all other safe options before resorting to a c-section. C-section should only be done in case of a true emergency.
- If baby is breech, I would like to try having baby rotated externally before resorting to C-section.
- No episiotomy or forceps
- If C-section, I want the baby given to Ben as soon as baby's dried off
- Ben would like to cut the cord

IMMEDIATELY AFTER DELIVERY

- I wish to have skin-to-skin contact with my baby (kangaroo care) – this is important for bonding
- Hold baby on my chest for nursing as soon as possible
- I do not want oxytocin (Pitocin) – natural ways instead
- I want to go be with baby in NICU *immediately* after giving birth
- Have baby with me as much as possible/me with baby in NICU
- Pictures of baby just born
- Copy of footprint/fingerprint
- As many newborn procedures as possible to take place in my presence

BREASTFEEDING

I plan to breastfeed exclusively. Nurse on demand, not at timed intervals. Please do not give baby formula, sugar water or pacifier. If baby is in NICU, I will pump so baby can have my breast milk.

NICU

Ben and I wish to be with baby as much as possible. I would like to hold baby skin-to-skin and try nursing often if allowed. Wait for circumcision (not immediately at birth). As few “extra” interventions as possible – shots, medications, etc. – other than necessary life-saving procedures; as little trauma to baby as possible.