

# My Cesarean Birth Goals

BIRTHING PERSON'S NAME: \_\_\_\_\_

BABY'S NAME: \_\_\_\_\_

PARTNER'S NAME: \_\_\_\_\_

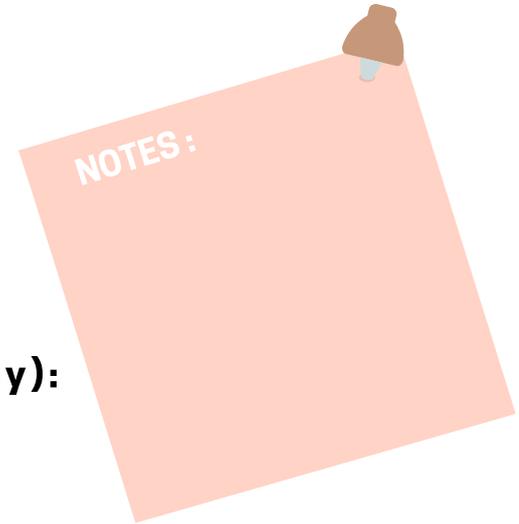
PEDIATRICIAN: \_\_\_\_\_

OB/MIDWIFE NAME: \_\_\_\_\_

HOSPITAL: \_\_\_\_\_

## For pain relief, I would like (check one):

- an epidural
- a spinal
- general anesthesia



## Prior to delivery, I would like (check all that apply):

- to meet my team who will be with me during delivery
- an explanation of the procedure before I am taken to the OR
- an explanation of the medications that will be used.
- \_\_\_\_\_ there for support before I go to the delivery room.

## During delivery immediately afterwards, I would like (check all that apply):

- to bring a photo/small keepsake to focus on
- to have a personalized playlist playing during delivery
- all talk that isn't directly related to the health and safety of me and my baby to be kept to a minimum since this is a very special time for us.
- like to keep the sex quiet and discover this ourselves.
- the OB to announce the sex of our baby
- ECG leads placed on my back so my chest is free for skin to skin contact with my baby
- my hands to be kept free so I can hold my baby upon delivery
- my spouse/partner to take pictures/video of the birth of my baby to help it be as personal and intimate as possible
- the procedure explained to me as it happens
- a clear drape or drapes to be lowered so I may be able to see the birth of my baby



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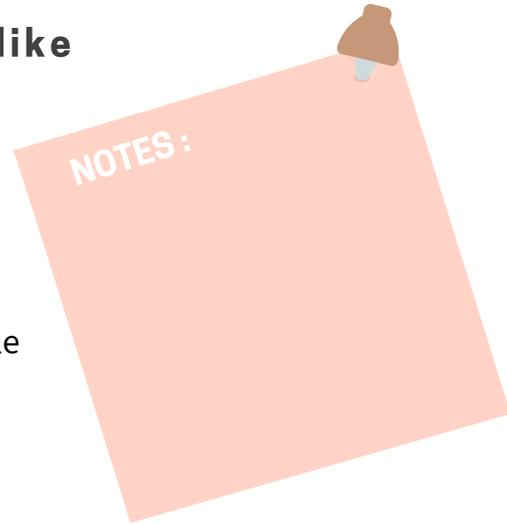
PEDIATRICIAN: \_\_\_\_\_

OB/MIDWIFE NAME: \_\_\_\_\_

HOSPITAL: \_\_\_\_\_

## During delivery immediately afterwards, I would like (check all that apply):

- to delay cord clamping until the placenta/cord has completed pulsing or for \_\_\_\_\_ minutes
- \_\_\_\_\_ to cut the umbilical cord
- immediate skin-to-skin on me or my birth partner if I am unable
- the vernix left on the baby and no bath
- assistance with latching my baby in the OR
- delay non-essential newborn assessments until we get into the recovery room or done while my newborn is on my chest in OR if needed immediately
- save my placenta to take home
- if my baby needs to go to the NICU I would like \_\_\_\_\_ to accompany my baby.
- to have cord blood drawn
- to have colostrum be my baby's first milk
- to discuss the situation with our OB/Pediatrician if other things are indicated by mouth such as formula or sugar water.



## During my recovery, I would like (check all that apply):

- my postpartum doula there as soon as possible for support
- all visitors out for the first \_\_\_\_\_ hours/days
- an IBCLC visit to make sure feeding my newborn is off to a good start
- my other children come to visit
- my IV, catheter, ECG leads, etc. removed as soon as possible
- to have an IBCLC visit to make sure feeding my newborn is off to a good start.
- paced-bottle feeding to be used when/if bottle feeding
- only breastfeeding safe medications prescribed

