

My Birth Preferences

This document is a way for you to share your personal preferences and wishes with your healthcare team. It is meant to start an open conversation and not to be a permanent part of your medical record. Please fill it out, and bring it with you to discuss with your provider at your next appointment. We also encourage you to bring this with you for your delivery.

Remember that deliveries can be unpredictable, and plans may need to be adjusted. Your preferences are important to us, and your doctor and nurses at the hospital will take your plan into consideration and explain any necessary changes to you.

** Indicates normal Emory policy. Discuss with your care provider if questions.*

Patient information

Patient Name _____

Support person(s) _____

Labor support team

Partner Family Doula Other _____

Labor environment

Quiet room when possible I would like to play music during my labor

** We encourage as much walking and movement and position changes as possible.*

Pain management preferences

Prefer natural comfort measures first (breathing, movement, shower, massage)

Please do not offer medications unless I ask

IV pain medication if requested

Epidural if requested

** IV access placed per hospital policy for safety.*

Fetal monitoring

- Intermittent monitoring if eligible

** Continuous monitoring if medically necessary.*

** Monitoring as my healthcare provider recommends.*

- Wireless monitoring if available

Vaginal delivery preferences

** We do not do routine episiotomy.*

- Choose pushing and delivery positions if possible

- Coaching on when to push if needed

** Delayed cord clamping (~60 seconds) unless medically not indicated.*

** Support person may cut the umbilical cord*

** Baby will be placed immediately skin to skin on mother's chest after delivery unless medically not indicated (or not desired by mom)*

** You are welcome to take photos throughout your labor and delivery. However, we kindly ask that you do not record videos during your actual birth or include staff or visitors in your photos. Photos are allowed during labor and birth (no video recording during birth).*

If cesarean birth is needed

- Partner present unless general anesthesia required

- Hands free to touch baby if possible

** Delayed cord clamping (~60 seconds) unless medically not indicated.*

- Skin to skin as soon as medically safe

- Partner may hold baby

After birth and postpartum care

- Immediate and uninterrupted skin to skin
- Lactation initiated as soon as possible
- Donor human milk acceptable if supplementation recommended

** The baby will stay with parents unless higher level of care is needed.*

Newborn care preferences

** Delay first bath (~8-24 hours)*

- Circumcision if male (to be discussed with provider): Yes No

** Routine newborn medications and vaccines per Emory protocol.*

Placenta

- I plan to take my placenta home if possible and will bring small cooler for transport immediately home

Additional requests
