



YEMI'S

# BIRTH PLAN

## DETAILS

NAME:  
PARTNER'S NAME:  
DOCTOR'S NAME:  
BABY'S SEX:  
PEDIATRICIAN:

## DELIVERY

- SPINAL ANESTHESIA
- NO RESIDENTS OR STUDENTS
- GENTLE PRACTICES
- CLEAR CURTAIN IF POSSIBLE
- IMMEDIATE SKIN TO SKIN
- PARTNER PRESENT AND WILL HOLD BABY IF MOM IS UNABLE

## HEALTH INFORMATION

- MEDICAL HISTORY:
- PREVIOUS SURGERIES:
- ALLERGIES:
- PREGNANCY:

## AFTER DELIVERY

- UMBILICAL CORD:
- DELAYED CORD CLAMPING
- CORD BLOOD:
- CIRCUMCISION:
- FEEDING:
- DO NOT BATHE OR WIPE VERNEX OFF BABY
- ALL BABY CHECKS DONE AFTER SKIN TO SKIN AND WITHIN SIGHT OF MOM/PARTNER
- BABY STAYS WITH MOM/PARTNER AT ALL TIMES

## ENVIRONMENT

- DIM LIGHTS
- CALMING SOUNDS/MUSIC
- LIMITED STAFF (NO STUDENTS)
- PARTNER AT BEDSIDE AT ALL TIMES
- ALWAYS ASK FOR OUR CONSENT

## NOTES

- I would like to stay in the hospital as long as possible.
- I would like a postpartum support wrap before I leave the hospital.
- I want to be able to walk as soon as possible after the procedure.
- I would like a lactation consultant to help get baby to latch.