Summary of Wishes

A natural, unmedicated birth with minimal monitoring or disturbances. Intervention only if absolutely necessary and husband to accompany me at all times. Immediate skin on skin and delayed cord clamping.

My Health

Medications: No medications

Allergies: Gluten, penicillin

Health Conditions: None, low BMI recorded

Planned Birth Type: Vaginal hospital birth

Previous Birth(s) details: Vaginal Home Birth with hospital

transfer

Birth Plan

About Me

Name: Ellie Jakes

DOB: 08.01.1996

Midwife: Claire Smith, NLAG Barton Unit

Doctor: Dr C. Patan

Birth Partner: Husband, Sam Jakes

Due Date: 7/04/23

Planned Place of Birth: St Mary's Hospital

Labour Preferences

Positions and Labouring

- Use of birthing ball
- Use of water; shower & bath
- As much movement as possible
- All fours or rocking
- Counter pressure on back from partner

Environment

- Have own music
- Dimmed lighting and own projector
- Have partner present at all times
- Happy to have student midwife or doctor present

Monitoring

- No continuous monitoring if possible
- Doppler OK if intermittent

MINIMA

• Minimal vaginal exams

Pain Relief

- · Own TENS machine
- Gas & air if needed
- No opioids
- No epidural

Birthing Preferences

During Pushing Phase

- NO coached pushing
- No episiotomy
- Partner to apply pressure to perineum to reduce tearing
- Push on all fours or side
- No lying on back or stirrups
- Baby delivered into my hands
- Baby placed immediately on my skin

In Event of Caesarean

- Would like own music
- Skin on skin if possible
- If unable, partner to hold baby/have skin on skin
- Would like drape removed or lowered for birth of baby
- In case of general anaesthetic, partner to have skin on skin and undisturbed as possible

Post Birth Preferences

Upon Baby's Arrival

- Partner to announce sex of baby
- No oxytocin injection
- Physiological third stage
- · Leave cord until stopped pulsing
- Allow Vitamin K for baby
- Don't wipe or wash baby
- Leave baby on skin for as long as possible (if safe)

Recovery

- Stiches avoided if possible
- If I need help showering, partner to stay with baby
- Happy to have support with breastfeeding if needed
- No gluten-containing foods offered due to allergy

Baby

- No swaddling
- Breastfed no formula to be given without explicit consent
- · Dressed by myself or partner





Summary of Wishes

Birth Plan

My Health

Medications:

Allergies:

Health Conditions:

Planned Birth Type:

Previous Birth(s) details:

About Me

Name:

DOB:

Midwife:

Doctor:

Birth Partner:

Due Date:

Planned Place of Birth:

Labour Preferences

Positions and Labouring

Environment

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Birthing Preferences

During Pushing Phase

In Event of Caesarean

Post Birth Preferences

Upon Baby's Arrival

Recovery

Baby



Me and My Health

Labour Preferences

Equipment or Resources

Birthing Preferences

