

How to Write a Birth Plan

- **KEEP IT SIMPLE:** One page MAX. Educate yourself about all your options, but only write down the essentials. This should be an outline and a conversation starter, not a detailed instruction manual for the staff. Ain't nobody got time for a novel, kween!
- **PREFERENCES > PLAN:** You can't plan birth! This document will be a list of your goals and preferences. If you educate yourself ahead of time and assemble a great birth team, you will be well-equipped to navigate whatever your birth has in store!
- **THE INTRO:** Consider including a nice little note at the top – “Thanks for being here to support us! This is a general list of our preferences, but we understand that birth cannot be planned. We just ask for informed consent and open communication every step of the way. Thanks!”
- **THE BREAKDOWN:** Organize your birth plan into three sections
 - **LABOR:**
 - Monitoring preference: intermittent vs. continuous
 - Are you OK with students/observers being involved in your care?
 - Cervical exams: Frequency? Do you want to know the results?
 - IV access: are you ok with a saline lock? Routine IV hydration?
 - Pain mediation preferences
 - “I hope to get an epidural once I am in active labor.”
 - “My goal is to have an unmedicated birth. Please don't offer me meds; I will ask if I need them.”
 - **BIRTH:**
 - Pushing: are you open to guidance? Option to try different positions?
 - Episiotomy: none unless medically necessary
 - Would you or your partner like to help catch your baby?
 - Immediate skin-to-skin
 - Delayed cord clamping until pulsing has stopped
 - **POSTPARTUM:**
 - Preferences regarding use of postpartum Pitocin
 - Placenta: are you keeping it? Do you want to see it?
 - Preferences on newborn procedures. (Delay all for at LEAST 1hr!)
 - Feeding: breast, bottle, or both?

- **CESAREAN:** You may want to include this section in case your baby needs to be born via cesarean. Here's a few things you can request...
 - Allow your partner AND doula to accompany you in the OR
 - Lower the drape to see baby be born (or not)
 - Delayed cord clamping and/or cord milking
 - Skin-to-skin in the operating room (as long as everyone's stable)
 - Sutures that will give you the best chance for a future VBAC
 - Delay newborn exam and all procedures until you're out of the OR and more aware (you might want to be able to watch as your baby is weighed and measured or make sure that they're only getting the newborn meds that you're ok with)
- **WHAT NOT TO INCLUDE:**
 - Desire to eat, drink, and move freely. Just do it, kween! You're a grown adult!
 - Labor and/or delivery positions. You don't need to make a list; just listen to your body and do what feels right in the moment.
 - Preference re: having your water bag broken. There's no one-size-fits-all here. Educate yourself about this ahead of time so you know the pros/cons.
 - Remember, if you've educated yourself well there will be a lot of things you know/want but don't need to write down on this list! Follow your gut and be the brave, strong, badass kween that you are! (A doula and a supportive partner REALLY help you to do this during labor.)
- **THE MORAL OF THE STORY:** The value of creating this document lies in the fact that you are getting educated about your options while you write it. It's less about walking into your birth place with a piece of paper to give the staff and more about understanding what's on that paper!

For more info on this topic, check out [episode 52](#) of the Birth Kweens Podcast!

Happy birthing, kweens!