

# IRELAND

# DEEPTI'S BIRTH PLAN

I spent hours researching books and official guidelines so you don't have to. Feel empowered and prepared for every scenario with my actual, comprehensive birth plan. Built on hypnobirthing principles, it's a complete document ready for you to reuse for your own positive birth experience in an Irish hospital.

- ✓ MY ACTUAL, COMPREHENSIVE BIRTH PLAN
- ✓ CONSULTANT-REVIEWED & PRACTICAL
- ✓ HYPNOBIRTHING & CALM BIRTH FOCUS
- ✓ UNMEDICATED & WATER BIRTH
- ✓ INDUCTION PATHWAYS
- ✓ UNPLANNED C-SECTION
- ✓ THE GOLDEN HOUR & NEWBORN CARE



# [NAME] Birth Plan

**Mother's Name:**

**Father's Name:**

**Doctor/Midwife:**

**Estimated Due Date:**

Dear Care Team,

Thank you for being part of our special day. We have created this birth plan to help us communicate our preferences for our baby's birth. Our primary goal is to have unmedicated, calm & natural hospital water birth with no intervention. As we are practicing hypnobirthing we intend to have a calm birthing experience for both myself and for my baby, therefore the environment and language are very important to us. It will be highly appreciated if words like "pain" and "contractions" are replaced with words like "comfort" and "surges" as I believe that birth need not be painful.

My husband will be my primary support and advocate. If I am focused on labor, please direct questions and updates to him. We understand that plans may need to change and we are open to discussion and are flexible in our approach. We trust your expertise and look forward to working with you.

## During Labour

### Environment:

- **Atmosphere:** To support my relaxation techniques, creating a calm, peaceful atmosphere is very important to us. We kindly request that the overhead room lights be kept dimmed or off whenever possible, as we will use our own soft fairy lights and a scented oil diffuser to create a spa-like feel.
- **Sound:** To minimize distractions, we ask that only essential personnel are in the room and that conversations are kept in low, hushed voices. We would like to play our own music.
- **Staff:** I do not wish for students to be present and only hospital staff that are required to be there.
- **Movement:** It is important for me to move freely throughout labor. I plan to walk, change positions, and use a birthing ball.

## Monitoring & Examinations:

We are absolutely open to answer any questions during monitoring but we would like to keep it limited to necessary questions only so that I can focus on labour progress.

- **Fetal Monitoring:** We prefer intermittent fetal monitoring (like Sonicaid or fetal doppler) over continuous electronic fetal monitoring (EFM)(CTG) , as long as the baby and I are doing well so that my movements are not restricted.
- **Vaginal Exams:** Please keep vaginal exams to a minimum and only perform them when medically necessary.
- **If Waters Break Before Contractions:** We would like to avoid vaginal exams to minimize infection risk. We are comfortable with you assessing labor progress through contraction patterns (duration, frequency, intensity) and by my breathing and behavior.

## Induction & Augmentation:

- **Induction Post-Ruined Membranes:** If my water breaks, we would like to wait up to 18 hours before considering induction, provided there is no clinical evidence of distress for the baby or risk to me (e.g., fever, meconium, cord prolapse).
- **Post-Term Induction:** We are open to discussing induction if I go past 42 weeks of gestation.
- **If Labour Plateaus:** If labor slows or stalls, we would prefer to wait a few hours to allow it to progress naturally before interventions are suggested, as long as the baby is not in distress.

## In Case of Medical Induction (if I have to be induced)

- **Cervix Ripening:** If my body takes over after cervix ripening, I would like to avoid Pitocin/Syntocinon.
- **Dosage:** If Pitocin/Syntocinon is required, we would like to start with a low dosage to see if my body takes over naturally. If the dosage has to increase, we kindly ask that it is increased gradually so that I get enough time to cope with the intensity of the surges.

## Pain Management

- **Natural Methods:** My preference is to manage pain using natural techniques, including focused breathing, massage, birthing pool, hydrotherapy (bath/shower), visualization, TENS machine, positive affirmation or by changing positions.
- **Medication:** Please do not offer pain medication or an epidural unless I specifically request it or it becomes medically necessary.

# Pushing & Birth

## Birth Position & Location:

- **Birth Pool:** My strong preference is to give birth in the water. We would appreciate support in making this possible.
- **Alternative Positions:** If a water birth is not possible, I would like to use a squatting bar or another upright, forward, and open (UFO) position. I wish to avoid lying on my back (supine position).
- **Pool Use with IV/Monitoring:** If I require an IV, we would like to explore options for keeping the birthing pool available, such as using a waterproof dressing and intermittent, handheld Doppler monitoring.
- **Assisted Delivery:** I strongly prefer to give birth without the use of assistive devices, such as forceps or a vacuum. If a medical emergency arises where these devices become necessary, they are only to be used after consulting with my husband first.

## Coaching:

- **Pushing Guidance:** If I am in an upright or UFO position, I would prefer to follow my body's natural urges to push without coaching. However, if I must be in a supine position, I would appreciate guidance.
- **If Pushing Plateaus:** We would like to wait at least two hours before considering interventions, provided the baby and I are well.

## Perineal Care:

- **Episiotomy:** We request that an episiotomy not be performed as a routine procedure. We will only consent if it is absolutely necessary for the baby's safety. If required, we prefer a mediolateral (sideways) incision.
- **Tear Prevention:** We would like to use warm compresses on the perineum during the pushing stage to help reduce the risk of tearing.

# Immediately After Birth

## The Golden Hour:

- **Skin-to-Skin:** Please place the baby directly on my chest for immediate and uninterrupted skin-to-skin contact for at least the first hour, regardless of a vaginal or C-section birth. If it's not possible for me to hold the baby I would like my baby to have skin-to-skin with my husband.
- **Environment after birth:** It is important to us that a peaceful environment is maintained after the baby is born that helps promote oxytocin, reduces blood loss and strengthens bonding moments.

- **Newborn Procedures:** We request that all routine newborn procedures (e.g., Vitamin K shot, eye ointment, weighing) be delayed until after the first hour of skin-to-skin, unless urgent.
- **Bathing:** We are happy for any necessary cleaning of the baby to be done while the baby is on my chest.
- **Postpartum Exams:** Please delay any non-urgent checks or stitches for me until after this initial bonding time.
- **Breastfeeding:** I would like to initiate breastfeeding within the first hour.
- **Keeping Baby Close:** We would like our baby to remain with us at all times unless there is a medical emergency.

#### **Umbilical Cord:**

- **Cord Cutting:** My husband would like to be the one to cut the cord.
- **Delayed Cord Clamping:** We request waiting at least 10 minutes (or until the cord is white and has stopped pulsating) before clamping and cutting. If a managed third stage is necessary, we'd still like to wait at least 5 minutes, as long as there is no excessive blood loss.

#### **Placenta Delivery:**

- **Natural Third Stage:** We prefer to deliver the placenta naturally without medication (Pitocin/Syntocinon), as long as bleeding is within the normal range (under 500ml). If I continue to bleed more than normal limits I accept for medicated placenta delivery.
- **Time:** We would like to wait at least one hour for the placenta to detach on its own before discussing intervention, provided there are no signs of hemorrhage.
- **Medicated placenta delivery:** We are open for medicated placenta delivery to avoid risks of hemorrhage.

#### **Ongoing Newborn Care**

- **First Bath:** We would like to delay the baby's first bath for at least 24 hours.
- **Feeding:** We plan to exclusively breastfeed. Please do not give the baby formula or a pacifier without our explicit consent. We would appreciate a visit from a lactation consultant during our stay.

## **In Case of a Gentle Cesarean Birth**

We hope for a vaginal birth, but if a C-section becomes necessary, we would appreciate your support in making it a gentle and family-centered experience.

- **Atmosphere:** We would like to maintain a similar spa-like environment in case of C-section. Please keep the operating room as quiet as possible, with conversation focused on the birth. I would like to play my own relaxation music.

- **Viewing the Birth:** We would like the option of a clear drape, or for the solid drape to be lowered, as our baby is being born.
- **Freedom of Movement:** Please place the IV, blood pressure cuff, and pulse oximeter on my non-dominant arm. We request that any electrodes are placed on my back or side to leave my chest completely free for skin-to-skin.
- **Immediate Contact:** Our highest priority is immediate skin-to-skin in the operating room. We request that any initial newborn assessments be done while the baby is on my chest. I would like the lights to be dimmed near my head and chest so that the baby is not brought to a bright light during skin to skin.
- **Partner's Role:** Please allow my husband to remain with me at all times. If the baby needs to leave the room, he will go with the baby.

### **Neonatal Intensive Care Unit (NICU)**

- If my baby has to be in intensive care then I want to assure that I provide as much care as possible and ensure my baby is fed my breastmilk.

### **General Preferences**

- **Personnel:** We request that no students or residents be present for our birth without our direct consent.
- **Postnatal ward:** My preference is to be moved into a private postnatal room if available.
- **Photography:** My husband will be taking photos and videos to document the birth.

Thank you for reading our birth plan. We are excited to welcome our baby in an empowering birth experience where my baby is born safely and calmly. I believe this is possible however my birth story pans out. Thank you for supporting us at our very special times of our lives. We will be sure to appreciate what you do for us, now and for the rest of our lives.