



Thank you for choosing Cedars-Sinai! We look forward to birthing with you. We believe that pregnancy and birth are natural experiences that are different for each woman and her family. We honor all families and respect your birth choices. We will share information with you, answer your questions and then make decisions together. When making decisions, it is important to know what "evidence shows." Evidence is the most up-to-date support from research that helps parents and caregivers make informed choices.

Here are important things you should know:

Evidence shows that:

When there are no problems in pregnancy or during labor, a vaginal birth is the safest way to have a baby.

- The hospital stay is shorter and recovery is quicker.
- There are less breathing problems for the baby.
- There is less risk of infection.
- There is less blood loss from mom.

Mothers with a good support team and different comfort options can cope better with labor. We welcome your support team (partner, doula, friends and family), and look forward to working together. Comfort options include:

- Using a tub or shower
- Warm packs
- Scented oils for massage
- Visualization
- Your favorite music
- Paced breathing
- Peaceful, dimly lit room

Medications also help relieve discomfort. Medications can be given through an IV or an epidural. An IV is a small tube put in your vein by a nurse, and an epidural is a small tube placed in your back by an anesthesiologist. If you choose to have an epidural, you will also need an IV. There are different kinds of epidurals:

- A "walking epidural" allows you to move more.
- A "standard labor epidural" offers more comfort.

Talk with your doctor to decide what is best for you.

When mothers move and change positions, their labor tends to progress better. That means you should walk, change positions and try many of our support tools (birthing ball, squat bar, rocking chair). If you would like a "standard labor epidural," we will use our "Rock and Roll" program to help you change your position. This will help your baby turn and move lower in your pelvis. When it is time to push, we will help you find the position that works best for you.





In a healthy mother and baby:

- We can check your baby's wellbeing with a hand-held tool as needed,
- Or with a fetal monitor that stays on your belly during labor.

We also offer a portable monitor that allows you to move more during labor. You and your doctor/midwife should talk about which method is best for you.

Labor progresses better when you drink enough fluids and are well-nourished. We will offer you clear liquids to help you keep your energy up. You are also welcome to bring your own drinks as long as you can see through them.

Babies have better blood counts and more iron if we wait to clamp the cord. This is because the placenta (the organ that nourishes and sustains the baby during pregnancy) will continue to pump blood to your baby, even after he or she is born. This may benefit your baby. Ask your doctor or midwife about this small step.

Umbilical cord blood has stem cells that could be lifesaving for someone in need. You may choose to donate your cord blood here at Cedars-Sinai for the Public Cord Bank.

Babies do better when placed skin-to-skin for one hour after birth. Most of the time, your doctor/midwife will place your baby on your chest right after birth. Skin-to-skin helps babies stay

warmer, cry less and get to know you. The nurse can check the baby and give medications while your baby is skin-to-skin. These medications include antibiotic eye ointment and Vitamin K. Talk with your pediatrician about these medications.

One of the most important jobs you will learn as a new parent is how to feed your newborn. Breast milk is the ideal source of nutrition for infants. It is a very healthy choice for both mother and baby. A mother's personal preference to formula feed or to breastfeed and formula feed is supported. We encourage skin-to-skin care when you feed your baby and for bonding time.

If there is an emergency, having an IV is safest for you and your baby. We can quickly give medications and fluids through an IV. It is recommended that we place an IV when you arrive in labor and delivery. Most of the time, we can cap and cover the IV. This is known as a saline lock. Even though few women have emergencies, we want to be able to respond quickly in case we need to. A saline lock does not get in the way of your movement.

In labor and birth, not everything goes according to plan; some things cannot be predicted. We will make sure that you and your support team agree with any changes that may need to be made to your care plan. Our goal is a healthy mom and baby, and a positive birth memory.

My birth preferences

Birth cannot be planned, but preferences can be shared. Birth preferences are the choices that are important to you. This document is a communication tool for you to share your preferences for labor, birth and recovery.

My care team			
My name: Along with Cedars-Sinai nurses, residents and m Support people: Obstetrician or Certified Nurse Midwife: Pediatrician:			
Labor preferences	Birth preferences	Newborn care	
☐ I am planning a vaginal birth I plan on laboring with: ☐ A "walking epidural" ☐ IV pain medication ☐ Unmedicated comfort techniques: ☐ Support person ☐ Massage ☐ Birthing ball ☐ Tub/shower ☐ Music ☐ Aromatherapy ☐ Other: ☐ All of the above. Let's see how it goes! ☐ I am planning a cesarean birth In the operating room, I plan on using: ☐ Music ☐ Aromatherapy ☐ Other: ☐ Music ☐ Aromatherapy ☐ Other:	I would like the cord clamped: ☐ Right away ☐ A few minutes after birth Do you want to take your placenta home? ☐ Yes. I will arrange for it to be picked up/removed from the room in the first hour after birth. ☐ No Do you want your cord blood collected for storage? ☐ Yes ☐ No If Yes, will you save it for your family's use or donate it to the public bank? ☐ Public ☐ Private	Skin-to-skin right after birth: Yes No Do you want the recommended newborn medications? Vitamin K Antibiotic eye ointment How do you plan on feeding your baby? Breast only Formula only Both breast and formula Unsure	
Something we missed? Any other birth preferences:			
\square I do not have any preferences for my labor, birth or newborn care.			
I have made the following birth choices because: (Choose all that apply)			
☐ I feel it is best for me. ☐ I feel it is best for my baby. ☐ Other:	made my decision	☐ I have done my research, read about birth choices and made my decision.☐ This is what my doctor/midwife recommended.	
It is important that all members of your care team know and understand your choices. ☐ I have reviewed my birth choices with my obstetrician or midwife during an office visit. ☐ I am bringing this copy to share with my care team.			









