OUR BIRTH PREFERENCES

Name: Doctor: NRIC: MRN:



We desire a drug free natural birth. Below are our Birth Preferences. Should a medical situation arise, please know that you will have our complete cooperation after we have had a clear explanation of the medical need and options available and have had the opportunity to discuss the decision between ourselves. In the absence of any medical indication, we ask that the following requests be honored. We truly believe that you will do your best to help us attain our wish for a joyous and most satisfying natural birth. Thank you!

during Labor



intermittent fetal monitoring



eat & drink allowed



dim room



talk softly



shower allowed for relaxation



free movement & positions



no episiotomy



no artificial membrane rupture



few or no vaginal exams



pain med only on request

after Delivery



natural placenta birth



delay cord clamping



immediate skin to skin



family bonding 2-3 hours



breastfeeding only



No bottles No pacifiers



No bath for baby



Rooming In

others