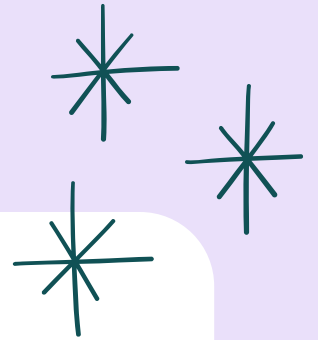


# *Birth Preferences*



Birthing Person name and pronouns:

Partner(s)/Support Circle, names and pronouns:

Preferred titles for parent(s):

Birthing Environment:



Preferred pain relief options:



Pushing/2nd stage:



Assisted vaginal birth:



Vaginal Examinations:

Induction and Augmentation of labour:



C-section birth:



Support people I would like present at the birth:



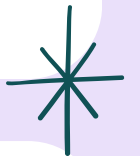
Support person to accompany me if I got to theatre:



Monitoring of baby during labour:

Positions I would like to try whilst in labour:

Episiotomy:



Placental Birth:

Active

Physiological

Delayed cord clamping



Skin to Skin and feeding:



Vitamin K:

- 1x IM/injection
- 3x Oral doses
- Declined

Hep B vaccination:

- Consent given
- Declined

Any other Birth or parenting preferences:

