

# **ADAMS PATTERSON GYNECOLOGY & OBSTETRICS**

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## **BIRTH PLAN**

**GOAL---** to welcome a healthy, vigorous baby into a family with a mother who recovers quickly and happily!

Our doctors have a call schedule which ensures that your care is directed by someone who is well rested and has time for a fulfilling family life of their own.

We are proud to care for our patients at hospitals that allow labor and delivery to proceed naturally whenever it is safely possible to do so, but which are also able to rapidly provide state of the art advanced care when appropriate.

**THE SAFETY OF MOTHER AND CHILD IS OUR PRIMARY CONCERN.**

Currently, modern medicine does not allow us to foresee exactly how any mother's labor and delivery will proceed. Until such time, we aim to provide the greatest flexibility possible to meet each individual need.

## **LATENT PHASE LABOR**

Latent phase labor is the early "prelabor" consisting of irregular contractions and little to no cervical dilation. We urge you to stay at home while in latent phase labor. Mothers are much more comfortable being able to ambulate, eat, bathe and surround themselves with friends and familiar environment during this stage.

## **ACTIVE LABOR**

Mothers in active labor are usually dilating from four to nine centimeters. Contractions are painful and from three to five minutes apart. Most women are admitted to the hospital during this phase, as they are unable to walk and are more comfortable in bed. Many women are nauseated and will vomit anything they take in. IV fluid and medication can completely control this issue. A vulnerable baby will show signs of stress on a monitor tracing during this time, so fetal monitoring is necessary for the baby's protection. IV access is also necessary for the safety of mother and baby. Of course, we encourage patients to ask for pain relief or anything else that might promote their comfort during this time. If labor is proceeding too slowly and the mother and baby are becoming exhausted and risking infection, both amniotomy (rupture of membranes) and oxytocin (the natural hormone that helps the uterus contract effectively) are sometimes used to encourage the safe progression of labor and avoid cesarean section.

## **DELIVERY**

We try to deliver the baby into a sterile field to decrease the risk of the baby becoming infected by contaminants such as Group B Strep. We encourage the support person to be present to cut the cord and help the mother hold the baby on her belly. Exceptions would be if the baby has a cord tightly wrapped around his/her neck, or if the cord is too short to allow the baby to reach the mother's abdomen. Sometimes, we will hold a dehydrated baby lower than the mother and placenta to allow gravity to help blood flow from the placenta into the baby before clamping the cord.

## **BONDING**

Bonding is a very special time for mother and baby. The fewer distractions for the new mother, the better. It is best if family and friends who were not present in the room during delivery do not enter at this time.

## **INSTRUMENTAL DELIVERY**

Occasionally, a mother is too exhausted or otherwise unable to push a baby the last millimeters necessary for a baby to be born. Even more rarely, a baby will show signs on the fetal monitor that he/she needs to be delivered immediately so that he/she can be resuscitated by the neonatologist. You will be relieved to know that in these unusual circumstances our doctors are all skilled in the safe use of forceps.

## **CESAREAN SECTION**

Sometimes there are unforeseen circumstances requiring C-Section. The most common are breech presentation, placenta previa, or a baby that has simply proven itself too large to be born in any other fashion. In addition, sometimes it is necessary to deliver a baby by C-Section if the mother has a life threatening condition that requires immediate medical intervention or if the baby appears to be in trouble and needs to be resuscitated and the possibility of a vaginal delivery is remote. Our schedules are flexible enough to offer this intervention whenever necessary.

## **RECOVERY**

We encourage all of our mothers to breast feed their babies immediately after delivery and then often. We know that the sooner mothers ambulate and assume full care of their baby the more quickly they fully recover. As you remember this special day, you will be assured knowing that the most wonderful day of your life and the most important day of your new baby's life took place in an environment with safety and happiness as our number one concern!