



## **Family Birth Preferences**

**Our goal is for your birth experience at The Ottawa Hospital to be as satisfying as possible. Please complete this form, so we can learn what is important to you and your family.**

**My name is:** \_\_\_\_\_

Childbirth is one of life's most special events. Your surroundings and the people present can influence the progress of your labour and birth. Studies suggest that babies are aware of their environment even in the womb.

It is important that you and your baby feel welcomed and loved. Think about with whom you would like to share your baby's birth. Please consider your security, your comfort and the support you will receive from those people closest to you as you complete this form.

1. I would like the following people with me:

in labour: \_\_\_\_\_

during the birth: \_\_\_\_\_

2. The following may help make me more comfortable:

in labour: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

during the birth: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. The most important things to me during my labour and birth are: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. The following is a scale to reflect how you feel about pain control during your labour.

***(Please circle the letter that best describes your feelings)***

- A** I have a very strong desire for no pain medicine during my labour.
- B** I have a strong desire for no pain medicine, but I may request it if I have a very difficult labour.
- C** I would prefer to avoid pain medicine, but only if my labour is short or very easy.
- D** I have no preference one way or the other about the use of pain medicine.
- E** I would like to use pain medicine, but as little as possible.
- F** I would like pain medicine before my labour becomes very painful.
- G** I have a strong desire to feel as little pain as possible.

You will have a nurse caring for you during your labour and baby's birth. There are a variety of options to assist you in managing your pain in labour. These include the birthing ball, the jacuzzi or shower, massage, warm blankets and cold compresses, music, narcotics (a kind of pain medicine), nitrous oxide (gas) and epidural. You may bring your own TENS unit, extra pillows, Ipad/MP3/CD player with music and light snacks or any other items that you think will help you manage your pain in labour.

What are your plans for managing you pain in labour?

---

---

---

---

---

Are there any other ways we can support you during your labour and birth?

---

---

---

---

---

5. When my baby is born, I would like to \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Throughout my stay in the hospital (after my baby is born), the following things are most important to me \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



Obstetrics/Gynecology Newborn Care and Women's Health

Thank you for completing this form. Please feel free to discuss it with your doctor then bring it with you to the hospital and share your preferences with your nurse.

***Remember to take your Birth Preferences Form home with you.***