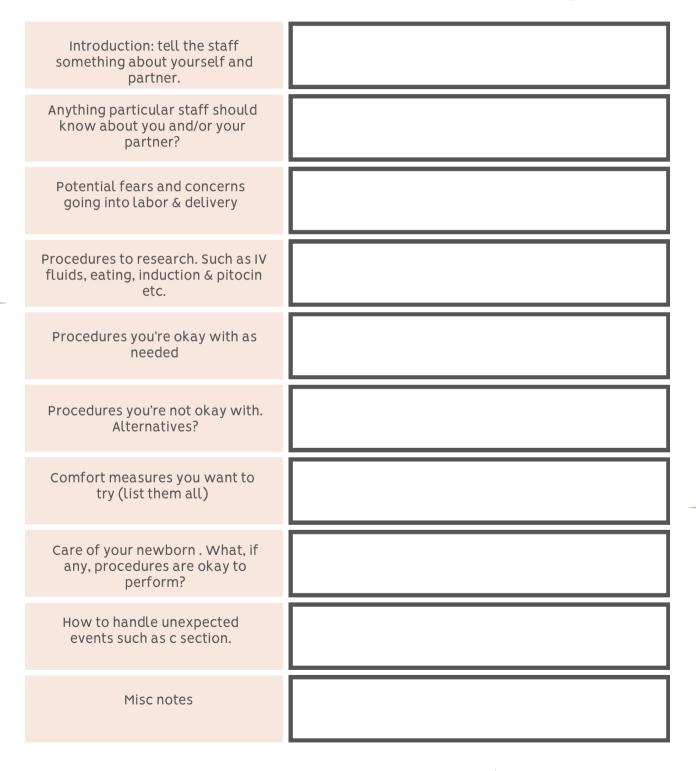
# -Naitural Birih Plan Brainsiorming





#### COMFORT MEASURES CHECKLIST

| Body Positions/Movement   | Comfort Touching  |
|---|---|
| Standing, leaning, slow dancing Walking Lunges Kneeling leaning forward Kneeling on one knee Sitting up Sitting Straddling a chair Birth ball (sitting, leaning) Lying down & side lying Semi-reclining | Acupressure Hand and foot rub Light stroking Firm pressure Crisscross on back Holding Hugging Resting touch Massage tools |
| Supine with tilt to side Squatting and/or supported squat Lap squatting   | Specific Back Measurements  |
| Heat/Warm Packs   | Counterpressure Double hip squeeze Hands & knees with/out birth ball  |
| To low abdomen/groin To perineum To low back  | Pelvic rocking (rebozo)  Lunge, asymmetrical positions  Walking/movement  Slow dancing  Abdominal lift (rebozo)           |
| Cold/Ice Packs  | Crisscross on back  |
| To low back To forehead, back of neck, upper chest To perineum afterbirth   | Relaxation/Tension Release  Relaxation Roving body check Slow full breaths Light breathing                                |
| Emotional Support   | Vocalization Encourage her to express herself freely  |
| Feedback & verbal reminders Encouragement & reassurance Give unsolicited praise after each contraction  | Hydrotherapy  |
| Patience & confidence in woman Undivided attention & Eye contact  | Bath/jetted tub Shower  |
| Take charge routine Anticipatory guidance & progress reports  | Misc<br>——  |
| Firm embrace Match her mood   |   |

| LABOR PREFERENCES  | DELIVERY PREFERENCES                                  |
|--|---|
| Environment  | Delayed Cord Clamping                                 |
| Dim lighting Soft music Limited interuptions                                     | Yes/No<br>Immediate Skin to Skin                      |
| Movement During Labor  | Yes/No<br>Newborn Procedures                          |
| Freedom to walk Use of birthing ball or chair Shower/Tub Hydration and Nutrition | — Hep B shot — Vitamin K shot — Erythromycin ointment |
| Eat and Drink as desired  IV fluids as needed  Saline lock                       | PKU Bath Circumcision Feeding                         |
| Monitoring Baby  Continuous fetal monitoring  Intermittent monitoring            | Breastfeeding Bottle feeding Combination              |
| No monitoring  | Visitors<br>Yes/No   Visitors list                    |
| Use of Medication  | - VISILOTS HSt  |
| Yes/No<br>Offer pain medication yes/no<br>Medication listed okay:                |   |
|  | EMERGENCY CONTACTS                                    |
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