

## SAMPLE List of Questions to Discuss with Doctor or Midwife BEFORE LABOR

- Under what circumstances would you need to strip or sweep my membranes?
- What medical reasons would require being induced?
- I want to avoid Pitocin augmentation and prefer nipple stimulation and intimate contact with my partner. Will that be a problem?
- I prefer artificial rupture of membranes to Pitocin if the baby is low and in a good position
- I will eat and/or drink during labor when I'm hungry. Will I need to sign a waiver?
- I prefer intermittent external fetal monitoring if the baby and I are okay
- I am hoping to avoid breath holding pushing unless there's a medical emergency
- I want to push in whatever position is most comfortable and avoid the supine position. What positions would you suggest?
- NO perineal stretching or massage when I'm pushing. I want warm compresses instead
- No episiotomy unless it's an emergency. I will do gentle pushing and want warm compresses to avoid a serious perineal tear
- Vacuum extractor should only be used to reposition the baby, not to pull the baby out unless all other avenues have been attempted, including position changes and vacuum repositioning
- I would like to avoid cord traction and allow my body to release my placenta
- If I have to have a surgical birth, please allow my partner AND my doula in the OR
- How long will you allow the cord to continue to pulsate without clamping it? I would like to wait until after cord stops pulsating and becomes white and flat
- Please do not milk the cord unless there is a true time constraint
- I would like you do vaginal seeding if I have to have a surgical birth
- Routine bulb suctioning is acceptable but I'd prefer to avoid it unless it's absolutely necessary