

C Section Birth Plan Template

Name: _____

DoB: _____

Partner's Name: _____

Doctor/Midwife: _____

Hospital: _____

Due Date: _____

Induction Date (if applicable): _____

Today's Date: _____

My Support People

Environment Preferences for Labor/Induction

During C Section

- I would like a mirror (if available) to see my baby being born
- I would like my support person _____ to be with me
- I would like to be fully sedated during the procedure
- I would like to be awake during the procedure
- I would like the doctors to talk me through the procedure I would like my midwife with me (if the hospital/room allows)

Other:

After Birth

- My partner or support person to cut the umbilical cord
- Save the placenta so I can take it home
- Skin to skin contact with baby
- I would like to see my baby when they are born (before cleaned and vitals)
- I would like to see my baby after they have had all vitals checked

Other:

Additional Notes/Preferences: