While the COVID-19 pandemic continually changes, March of Dimes knows that every day babies are still being born. This document has been designed for you to assess the preferences you’d like based on the policies of your chosen place of birth. At the end you’ll find a series of questions that you should ask your provider as you prepare for your baby’s birth.

### Make a birth plan.

#### 1. Where do you plan to have your baby?

____________________________________________________________________

#### 2. Can a support person be present during labor and birth? If yes, who is your primary support?

Name: __________________________
Phone: _________________________

This person is:
- [ ] Your partner
- [ ] Your baby’s father
- [ ] A family member
- [ ] Your friend
- [ ] Clergy
- [ ] Your doula

#### 3. Is there an option to have virtual support during labor and birth?

Virtual options:
- [ ] By phone
- [ ] Skype
- [ ] FaceTime
- [ ] Facebook
- [ ] Zoom
- [ ] WhatsApp

#### 4. Can you bring your own device (phone/iPad)?

- [ ] Yes  [ ] No

Does the hospital have WIFI access?

- [ ] Yes  [ ] No

Will the hospital provide a device for virtual support?

- [ ] Yes  [ ] No

#### 5. What support do you want during labor?

- [ ] Help with breathing
- [ ] Help working through contractions
- [ ] Massage
- [ ] Help to move around
- [ ] Use of labor tools (birth ball, peanut ball)
- [ ] Sensory (lights, music)
- [ ] Other ____________________________

Your name: __________________________

Your provider’s name and contact information: __________________________

Your baby’s due date: __________________________

Your baby’s provider’s name and contact information: __________________________
6  Do you want to move around during labor?  
   □ Yes □ No  
   What position(s) do you want to be in during labor?  
   □ Lying down  
   □ Sitting  
   □ Standing  
   □ Other ________________________________

7  What kind of medicine, if any, do you want to help with labor pain?  
   _________________________________________

8  Do you want to hold your baby skin-to-skin during the first hour after birth?  
   □ Yes □ No  

9  Do you want delayed cord clamping?  
   □ Yes □ No  

10 Who do you want to cut the umbilical cord?  
    _________________________________________  

11 Do you plan to bank/donate your baby’s umbilical cord blood?  
   □ Yes □ No  

12 Do you want your baby with you at all times after birth? Or is it OK for your baby to spend time in the nursery?  
   □ Stay with you at all times  
   □ OK to stay in the nursery  

13 Do you plan to breastfeed your baby?  
   □ Yes □ No  

14 Do you want to meet the lactation consultant while in the hospital?  
   □ Yes □ No  

15 Do you want to be told before your baby is offered a pacifier or formula?  
   □ Yes □ No  

16 If your baby is a boy, do you want him circumcised?  
   □ Yes □ No  

17 Are there special traditions you want to take place when your baby is born?  
   □ Yes □ No  
   Describe _________________________________  
   _________________________________________  
   _________________________________________

18 Who is your emergency contact?  
   Name _________________________________  
   Relationship to you ______________________  
   Phone _________________________________

19 Is there anything else the hospital or birthing center staff should know about you or your baby’s birth?  
   □ Yes □ No  
   Describe _________________________________  
   _________________________________________  
   _________________________________________

20 Are there words or expressions that you’d like the health care team NOT to use?  
   □ Yes □ No  
   Describe _________________________________  
   _________________________________________

21 Do you prefer to limit the number of health care staff that enter your room?  
   □ Yes □ No
When preparing for birth, call your facility to ask:

1. Can I bring a partner or support person with me?

2. If I’m not permitted to have a support person present, what are the facility’s policies about having a virtual support person?

3. If I’m not permitted to have a support person present, how will your staff support me and help manage my emotional and physical needs during labor and delivery?

4. How will my baby and I be protected from COVID-19 during labor and delivery, and what are the policies about wearing a mask for pregnant and post-partum women?

5. Do you have a virtual hospital tour to prepare for my labor and delivery?

6. What am I permitted to bring to the facility with me?

7. Will I be tested for COVID-19?

8. What will happen if I test positive for COVID-19?

9. What will happen if my baby tests positive for COVID-19?

10. What is the average time frame for post-partum discharge for mom and baby?

11. What is your facility’s policy around visitors after I have my baby?

12. Are there any other facility-specific labor and delivery policies that I should be aware of?

When you arrive, ask:

1. Have there been any changes in the facility’s labor and delivery policies?

2. While in labor, where am I permitted to move around?

3. What are the policies around eating and drinking during labor?

4. What will happen if I test positive for COVID-19?

5. What will happen if my baby tests positive for COVID-19?

6. What is the average time frame for post-partum discharge for mom and baby?

7. What is your facility’s policy around visitors after I have my baby?

8. Are there any other facility-specific labor and delivery policies that I should be aware of?

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