TODAY'S NEW MOTHER:

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Years ago, when a woman was pregnant, she went to the local obstetrician, or maybe the one her mother went to, and carefully followed his directions for prenatal care. They established almost a paternal relationship. If she depended on him and obediently followed his advice, she was a good patient.

Sadly, some of this style of health care continues to exist in our country today. However, as more and more women become aware of their options, they are seeking physicians who can best meet their personal needs. A sense of wanting to participate more in one's health care is emerging and even physicians are beginning to respond to this demand. Some are modifying their practices as a direct result of the pressures being applied by these new female consumers of health care.

The time has indeed come for wamen to be assertive, not just in the work force or in their personal relationships, but in their choices for good health care. Unfortunately, many women are not aware that as the largest consumers of health care in this country, they have the potential power to create a health care system that meets their personal needs. It's demeaning and disgraceful to be subjected to waiting two hours or more in a crowded office for a prenatal checkup which may take all of five minutes. It's no wonder that our nation ranks 14th in the world in terms of infant mortality! There is little, if any, health education in many obstetric and pediatric offices and yet, the fee for these services continues to climb into the thousands.

Health care is a service pro-

Choose care you deserve vided by health care professionals. These include physicians, nurses, nurse practitioners, nurse midwives and various other individuals. There is a fee for this service which comes with no guarantees. At the very kitchen, you would get a number least, the service should meet of estimates and you would want the needs of the consumers insome assurance that the service volved. You wouldn't think of would be provided in a manner blindly paying for any other type which satisfied you. When it of service without first investigatcomes to your body and your ing it very carefully. For instance, baby, you should expect much if you were remodeling your more.

The following list of questions is a tool to help you choose the right health care providers and hospital for you and your baby. There may be many other questions depending on your personal situation. Try and think of health care as a service you are purchasing. If you run into physicians or institutions who are offended by your inquiries, ask yourself "Is this someone who will really be able to work together with me in delivering and nurturing my baby?" Women can make a real difference in the type and quality of health services offered, but we must take the responsibility for being assertive, investigating our options, and participating actively in our health care.

## Questions to ask an obstetrician

☐ Can I meet with you to talk about my needs and desires prior to my first official prenatal visit?
If so would there has a fee feethire in its to the
If so, would there be a fee for this visit? How much?
What is your fee for a normal, uncomplicated vaginal delivery?
What is the requested payment schedule?
What is your fee for a Cesarean Section delivery?
☐ For what reasons would you perform Cesarean Section delivery?
Do you perform vaginal deliveries after Cesarean births?
☐ Are there separate charges for anesthesia? If so, what are
tney?
Is the father allowed to be present during labor and delivery?
∐ Is there any situation when he would not be permitted to stay.
(e.g. during a Cesarean birth)?
If the father is not able to be present, may another support
person be able to take his place?
☐ If the father or other significant person wants to stay for labor
and delivery, is it required that they attend childhirth classes?
If so, must it be certain classes or classes of your choice?
How much involvement is permitted for siblings?
Do you require a shave and/or prep prior to delivery?
Do you use IV's during labor and delivery?
Do you always use electronic fetal monitors during labor or just
during certain circumstances? What are those circumstances?
Do you require an enema prior to delivery?
Do you permit the drinking of clear fluids during labor?
Are you open to having a LeBoyer type delivery?
Which physicians cover for you when you are off?
☐ Which hospitals are you affiliated with?
Are there birthing rooms available in these hospitals?
Approximately what percentage of your deliveries are con-
Quoted in Diffiling rooms as opposed to traditional delivery rooms?
☐ What approximate percentage of your deliveries require
episiotomies?
How do you feel about circumcision?
Are you opposed to an early discharge option (8 hrs., 24
hours)?
Do you feel comfortable having a woman deliver her baby in a
position that is easiest for her?
Do you offer any health education programs or must I seek
these myself and pay for them separately?
☐ What is the schedule for prenatal visits?
☐ What are your office hours?
☐ Would you feel comfortable if we worked together on a first
name basis?