



MARY'S HANDS
NETWORK



BUILDING YOUR BIRTH VISION

CLIENT GUIDE

THE POWER OF YOUR BIRTH VISION

Your Birth Vision, sometimes called a birth plan, is a way to share your hopes, preferences, and priorities with the people who will support you throughout pregnancy, labor, and those first moments with your baby. It isn't a list of demands or a rigid contract. Think of it like a map: a guide to help you explore your options and start meaningful conversations with your birth team.

Birth is full of unknowns. Your journey may take twists and turns, labor that comes on quickly or moves slowly, unexpected interventions, or perhaps the smoothest, most peaceful experience you could hope for. *A Birth Vision helps you prepare for what you can, while staying open to the changes that may come along the way.*

As you read through this guide, take your time and make it your own. Circle or check off the things that matter most to you. Highlight the areas where you feel unsure or want to learn more. When you come across something you've never heard of before, jot it down so you can ask questions or do a little research later.

When faced with a decision, it can feel overwhelming, especially in the moment. A helpful way to work through those choices is to use the *BRAIN* tool. It's a simple acronym to help you pause and think through each step: What are the *Benefits*? What are the *Risks*? Are there any *Alternatives*? What does your *Intuition* tell you? And finally, what happens if you choose to do *Nothing* for now?

Empowered birth isn't about controlling every detail or going it alone. It's about finding a provider you trust, choosing a birth place where you feel safe and supported, and trusting your *own* voice as you make decisions together with your care team.

And when it's all said and done, no matter how your birth unfolds, it matters. You held life inside of you and brought it into the world. That is incredible. You are incredible.

Congratulations, love. You're doing it.

CREATING YOUR BIRTH TEAM



My Name:

Baby's Name:

Phone Number:

Due Date:

Support/Partner:

Baby's Provider:

Phone Number:

My Provider:

Delivery Location:

Ask your provider to review your Birth Vision with you, and if you can, have a signed copy added to your chart so your wishes are clear to the whole team. This is also a great time to discuss what to expect when you're admitted, the routines on the labor and delivery unit, when you might need to adjust your plan, and any practices or concerns your provider may have that aren't already included in your vision.

Provider Signature: _____

Date: ____ / ____ / ____



Health History:

- ☐ Group B Strep
- ☐ Genital Herpes
- ☐ Sexually Transmitted Infections
- ☐ Hepatitis / HIV / AIDS
- ☐ Previous Traumatic Birth
- ☐ Fetal Diagnosis: _____
- ☐ OTHER: _____
- _____
- ☐ High Risk Pregnancy
- ☐ Diabetes (Gestational/Type 1 or 2)
- ☐ High blood pressure (Preeclampsia)
- ☐ Mental health conditions
- ☐ Rh incompatibility with baby
(Mom has negative and baby has positive blood type)
- ☐ Anemia

Delivery Plan:

- ☐ Vaginal
- ☐ Water birth
- ☐ C-Section (Planned)
- ☐ VBAC (Vaginal Birth After Cesarean)
- ☐ Unsure

Members of my Birth Team:

- ☐ Partner
- ☐ Parents
- ☐ Other children
- ☐ Doula
- ☐ Other: _____

Hospital Preferences:

- ☐ Wear my own clothes
- ☐ As few interruptions as possible
- ☐ Minimal vaginal/cervical exams
- ☐ Hydrate with clear liquids
- ☐ Eat or drink as permitted
- ☐ NO IV line (unless medically urgent)
- ☐ An IV line for fluids/medications
- ☐ A saline lock (IV port, no tubing)

Medical Interventions:

- ☐ Continuous fetal monitoring
- ☐ Intermittent fetal monitoring
- ☐ Doppler monitoring only
- ☐ Only if baby is in distress
- ☐ Shaving my pubic area
- ☐ Urinary catheter
- ☐ Enema
- ☐ No preferences



Induction/Augmentation:

- | | | |
|--|---|--|
| ☐ Only if baby is in distress | ☐ Position changes | ☐ Mile's circuit |
| ☐ Nipple stimulation | ☐ Rupture of membranes | ☐ Cytotec |
| ☐ Membrane sweep | ☐ IV Pitocin | ☐ Cervical ripening balloon |
| ☐ OTHER: _____ | ☐ Prostaglandin gel | |
- _____

Labor Room/Comfort Measures:

- | | | |
|---|---|---|
| ☐ Dim lighting | ☐ Yoga ball | ☐ Meditation |
| ☐ Aeromatherapy | ☐ Peanut ball | ☐ Visualization |
| ☐ Music | ☐ CUB | ☐ Vocalization |
| ☐ Quiet | ☐ Shower | ☐ Position changes |
| ☐ Massage | ☐ Tub | ☐ Walking/Dancing |
| ☐ TENS Unit | ☐ Hot/Cold therapy | ☐ Breathing techniques |
| ☐ Epidural | ☐ Nitrous Oxide | ☐ Oral pain medication |
| ☐ IV pain medication | ☐ Saddle block | ☐ Nothing |
| ☐ OTHER: _____ | | |
- _____
- _____



During Delivery:

- | | | |
|---|--|--|
| ☐ Push spontaneously | ☐ Avoid episiotomy | ☐ Perineal massage/support |
| ☐ Push as directed | ☐ Avoid forceps use | ☐ I want to help catch baby |
| ☐ Use a mirror to see crowning | ☐ Avoid vacuum extractor | ☐ Let partner catch baby |
| ☐ OTHER: _____ | ☐ Touch baby's head when crowning | |
- _____

In case of C-Section

- ☐ A second opinion
- ☐ All other options are exhausted
- ☐ Prefer to stay conscious
- ☐ Partner/Support person to remain
- ☐ Screen lowered to watch baby born
- ☐ Surgery explained as it happens
- ☐ Vaginal seeding
- ☐ Partner/Support person to hold baby

Immediate Post-Delivery:

- ☐ Delayed cord clamping (1-3 minutes)
- ☐ Delayed cord clamping (Not pulsing)
- ☐ Cord blood to blood bank
- ☐ Donating cord blood/placenta
- ☐ Deliver placenta without assistance
- ☐ See the placenta before discarded
- ☐ Saving the placenta
- ☐ Immediate skin to skin

Newborn Care:

- | | | |
|---|--|--|
| ☐ Golden Hour (uninterrupted) | ☐ Hearing screen | ☐ Immediately bath baby |
| ☐ Exams in my presence | ☐ Hepatitis B Vaccine | ☐ Delay bathing at least 4 hours |
| ☐ Interventions/Assessments <i>after</i> bonding | ☐ Vitamin K shot | ☐ Delay bathing at least 24 hours |
| ☐ Heal stick for PKU | ☐ Vitamin K oral | ☐ No bath in hospital |
| ☐ OTHER: _____ | ☐ Antibiotic eye ointment | ☐ Do not offer formula |
| | | ☐ Do not offer pacifier |
- _____



[illegible]



A Note from Mary's Hands Network

We are so honored to support you on this journey. This birth plan is not a contract; *it's a tool*. It's designed to help you explore your options, empower yourself with knowledge, and spark meaningful conversations *with your provider and birth team*.

As you prepare for labor, birth, and the immediate postpartum period, use this guide as a conversation starter. It's here to reflect your values, preferences, and hopes, not to dictate a specific outcome.

If there's anything you need, we're here for you.

- Use our Text-a-Doula Line for real-time support
- Schedule a virtual 1:1 visit with one of our staff doulas by emailing us directly.
- Reach out to your assigned doula team or check out the resources on our website.

Your voice matters. Your choices matter.
You don't have to walk this path alone.

With love,
The Mary's Hands Network Team



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