



My Birth Care plan

This birth care plan is from:

My partner is:

My primary care provider is:

My coördinating healthcare provider is:

My coördinating care provider is reachable through the contact form on the website (www.belle-vie.nl) or info@belle-vie.nl in the name of your CoZo.

In this birth care plan you describe your wishes regarding your pregnancy, delivery and maternity bed. It's a way to get clear on what's important to you. The plan is intended for you, your partner and your healthcare provider. The person who supervises your pregnancy, delivery and maternity bed will try to take your wishes into account as much as possible.

"I really have no idea..."

Some women and partners have no idea about their pregnancy, delivery and maternity bed. While another can have specific wishes, often based on previous experience. For example, wishes for the atmosphere, the circumstances and the way they want to give birth. Several topics are covered in this birth care plan.

Handy overview

In this birth care plan you will find an overview of the dates of your check-ups and what will happen during these check-ups. It's possible that not every appointment goes exactly as indicated, this is depending on how your pregnancy is going.

Always take your birth care plan with you

It's important to always bring your birth care plan with you during an appointment for an check-up. In this way you're able to write down all our questions and the answers to these questions. Did you made specific agreements with your obstetrician or gynaecologist? Make a note of this in the birth care plan. This makes it possible to keep an overview together.

The collaborating midwives, gynaecologists, nurses and maternity nurses of @verlosdenbosch wish you a very pleasant pregnancy!

Belle Vie
Geboortezorg
& welzijn

Jeroen BOSCH  ZIEKENHUIS

Coöperatie Verloskundigen
's-Hertogenbosch e.o.

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Stage: Pregnancy

What's important for you?

There are different subjects mentioned in this birth care plan, at each subject you may write your wishes. This also applies to the pregnancy period. We're not sure if everything you wish for is possible. For example, sometimes it's not safe for you or your child. In any case, it's important for us to know what your wishes and expectations are so we're able to discuss this and provide you, your child and the family with the best care.

Wishes

Your pregnancy is central to our care. That's why it's important for us to be aware of your wishes and expectations regarding your pregnancy and our guidance. I/we like it when:

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Contact with the healthcare provider

We would like to hear what you prefer in the contact with the healthcare provider during your pregnancy. You probably told most of them during the intake but if there are any wishes which you haven't discussed yet, you can write them down below. I/we like it when:

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.....
.....

CoZo conversation:

At around 27 weeks of being pregnant you will have a check-up appointment with your CoZo. Together you will evaluate the pregnancy and the care which is already given. Below you will find space to write down your points which you want to discuss during the CoZo conversation. My/our points to be discussed during the CoZo meeting:

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Stage: Giving birth

Nothing is more unpredictable than giving birth. So maybe you're wondering if a birth care plan makes sense? Of course it is! If your delivery doesn't go as expected, the person who supervises you must have to make choices. A birth care plan helps them out because you have thought about how to handle different scenarios in advance. It makes it possible for everyone around you to know what's important to you. Do you have any wishes for the delivery? You can discuss this with your coordinating care provider. Your birth care plan will become a part of your medical record. It's as important as your medical history.

Location:

Where would you prefer to give birth:

- At home
- Outpatient in hospital

Support

Are there other people present during the delivery, besides you and your partner:

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During the delivery you will be supported and guided by medical professionals. In the case of an uncomplicated delivery, this will be the midwife and the maternity nurse. We are a training practice, so interns may also be present. If you object to this, you may always notify this by your midwife. In the event of a medical delivery there will be present, a clinical obstetrician and/or (assistant) gynaecologist and a nurse. They might also work with students and/or interns.

Do you have any objections against this?

- No
- Yes

Communication

During the delivery we will explain the course of the delivery, coaches you and give you advice on how to cope with the contractions. We will discuss all actions in advance with you and your partner and we explain why we handle like we do.

What do you prefer regarding communication during the delivery?

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Positions

When dealing with contractions and during pushing you can adopt different positions. There are postures in which the (press) contractions are easier to absorb. Everyone experiences them different, so it's best to try a few. You can also use tools to make the delivery more pleasant/faster, such as a skippy ball, birthing stool or a bath. Your midwife will advise and guide you in this (see also the KNOV brochure about postures on our website).

Which positions do you prefer while dealing with the contractions?

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Dealing with the pain

The birth of your child is one of the most beautiful moments of your life. But giving birth is also painful. That is why it is important to prepare you as much as possible. For example, during labour you can try different positions, use a hot water bottle, take a shower, take a bath, do breathing exercises, listen to music, use TENS, etc.

There's also an option of getting medication against the pain.

- I have / rent a TENS
- In principle I don't want any medication against the pain
- I only want medication if I ask for it
- I want medication from the start of the delivery

If I choose medication, my preference is for:

- Epidural (epidural analgesia)
- Remifentanyl (a pump with a morphine-like substance)

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Photography

Many expectant parents like to have photo's or movies of the birth of their child. If your health caregivers have given you permission to take photos and or make movies, you may decide by yourself whenever you want to take one. If they don't agree with it you can't take them. It's also possible to bring a photographer.

- I don't want to take photo's and/or make movies of the birth
- I only want to take photo's and/or make movies after the birth
- I want to take photo's and/or make movies of the entire birth and after giving birth

Just after giving birth, I would like to

- Exposing him/her on my chest (stomach) (skin-to-skin contact)
- That _____ cuts the umbilical cord
- Breastfeed my child within the first hour after the delivery
- Taking care of my child as much as possible together with _____ (feeding, dressing, etc.)
- See the placenta
- Preserving the placenta

Nutrition

I would like to:

- Breastfeed my child
- Bottle feed my child

Other wishes

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Stage: Maternity time

The first acquaintance with your child is always a special moment. We would like to make it go by the way you wish for. We will try to let you enjoy this intimate moment as much as possible. Do you have any special wishes for this moment? You can write down everything that comes to your mind. Together we will discuss what's possible.

Breastfeeding/bottle feeding

Earlier on in the birth care plan you indicated that you wanted to breastfeed/bottle-feed. Is there anything you would like to pass on to us or we need to take into account?

I'm going to take my child feeding. For me it's important that:

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Going home / maternity care

You will receive help at home from the maternity nurse. The maternity nurse will teach you and your partner to take care of the baby. She will also check your recovery and the development of the baby. The maternity period is an intensive time, that's why it's important to indicate in advance what your expectations are.

I/we find this important:

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Check-up 6 weeks after the delivery

During this check-up we consider how the pregnancy, delivery and the maternity week went. We will discuss any physical complaints, how you feel, how your child is growing and how you feel about the new (family) situation. In addition, we will discuss your wishes and options for contraception. Furthermore we will consider how you have experienced our care.

7-12 weeks 1e trimester (0 -12 weeks)

In an introductory meeting we will discuss the following topics:

- o General information
- o Medical, family and (if applicable) obstetric history
- o Diet and lifestyle
- o Maternity care
- o Information about recognition of the baby
- o Pregnancy course
- o Explanation of the birth care plan, coördinating care provider and MDO
- o Examination for possible congenital abnormalities (Prenatal screening)

During this period you will receive the following examinations:

- o Blood pressure
- o Weight
- o Blood test
- o Urine examination
- o Ultrasound vitality and ultrasound term

What do you need to arrange during the first trimester?

- o Maternity care
- o Report pregnancy to health insurer
- o Get blood drawn
- o Have early prenatal screening determined

14-24 weeks 2e trimester (12-24 weeks)

Check-ups are every 4 weeks:

- o Blood pressure
- o Weight
- o External pregnant examination
- o Listening to the heartbeat of the baby
- o Information about the 20-week ultrasound

In this trimester you will receive information about the following topics: pertussis vaccination, movements of the baby, preparation for the delivery, place of the delivery, feeding the baby.

24-30 weeks 3e trimester (24-42 weeks)

Check-up are every 3 weeks (you will also receive the same examinations as during the 2nd trimester)

- o Home visit by a maternity care organization
- o CoZo conversation
- o Blood tests at 27 weeks if RhD or Rhc negative
- o Blood tests at 30 weeks for the HB level

In this trimester you will receive information about the following topics: birth care plan, how to deal with pain during labour, monitoring your baby, maternity week and recovery.

30-36 weeks Check-ups are every 2 weeks

- o Standard growth ultrasound at 32 weeks
- o Discussing the birth care plan
- o Discussing the maternity period

36-40 weeks Check-ups are every week

- o Information about stripping (loosening membranes)

41 weeks Possibility to strip

41-42 weeks Extra check-up at the hospital

42 weeks Discuss possibility of induction

Dag 1/8 (of 10) after the delivery

Maternity week

Medical and psychological check-ups for mother and baby

- o Blood Pressure Check
- o Check-up potential wounds
- o Discussing how to feed the baby
- o Discussing how the delivery went
- o Screening hearing and heel prick
- o Discussing what it's like to be a parent
- o Your file is sent to the GP and the consultation bureau