



Client Questionnaire

Please bring this with you to your 30-week visit.

Name: _____ Date: _____

Below are some questions we would like you to consider. The list below is what could be expected at a birth with Lincoln Community Midwives. If you have any questions about the list below please discuss this with one of your midwives.

- Lights are low/dim; you can bring music to the hospital to listen to
- Support is given in labour, but with the intention of not interfering with other labour support as preferred (e.g. partner, doula etc.)
- Information is provided throughout the labour, birth and postpartum, with you making decisions about your care as well as your baby
- Nurses and or physicians are involved in your birth / care only if indicated (e.g. there is a need for a consultation or transfer of care)
- Episiotomies are performed only when necessary (< 10% of the time)
- Baby is delivered onto your belly & remains skin to skin
- You can deliver in whatever position makes you comfortable &/or is most effective in helping the baby to be born – keep in mind birth positions may be limited if you have an epidural
- The umbilical cord is clamped and cut only after it stops pulsing unless there is a medical need to do so earlier (e.g. concern for mother or babe)
- The cord may be cut by whoever wishes, unless there is a medical reason for the midwife to do so (as above)
- If all is well, someone other than the midwife may catch the baby if requested (e.g. partner)
- Interventions are kept to a minimum unless medically indicated &/or requested (e.g. IV, epidural, oxytocin drip etc.)
- Enemas and shaving of the pubic hair are NOT done (whether you have a doctor or midwife). They are unnecessary, outdated interventions.
- Monitoring of the baby in labour is by 'intermittent auscultation' (listening with the Doppler every few minutes) unless a situation arises which requires continuous electronic monitoring
- Breastfeeding can start as soon as possible

Birth preferences / thoughts about your care

You & your partner (if applicable) should both answer these questions.

- 1) Where do you plan to have your baby? _____

- 2) What do you see as the duties & responsibilities of your midwives during your pregnancy & birth? _____

- 3) What do you see as your responsibilities during your pregnancy & birth?

- 4) Describe how you best cope with pain or stress (be honest).

- 5) a) Have you considered additional labour support such as a Doula?
b) Who will be with you during labour?

- 6) Most women have some concerns or questions in their pregnancy that they think about more than anything else. What are those concerns or questions?

- 7) Is there anything you want to be sure to discuss or share with us (e.g. 'sensitive' issues such as history of sexual abuse)?

- 8) **If planning a homebirth**, how would you feel if a transport to the hospital were necessary? ***If planning a hospital birth, go to the next question.***

- 9) **If planning a hospital birth**, do you plan to have medication for pain relief? If so, what type? ***If planning a homebirth, go to the next question.***

- 10) Please comment on what you know about risks & complications in pregnancy and birth and how you feel about them/how you think you'd handle them.

- 11) Please add any additional comments or thoughts you wish to share, including any further birth preferences.

