

C-Section Birth Plan

Planned (scheduled) or unplanned cesarean birth

birthplan.net

Name: _____

Birth partner: _____

Hospital: _____

Allergies: _____

Scheduled date: _____

Surgeon / OB: _____

Baby's doctor: _____

Reason for cesarean (optional): _____

We are preparing for a cesarean birth and would like it to feel as calm and family-centered as possible. Baby's and my safety come first - please tell us if any preference isn't possible.

BEFORE SURGERY

- ☐ Partner with me for the spinal / epidural
- ☐ My own music in the operating room
- ☐ Staff introduce themselves
- ☐ Talk me through each step
- ☐ Anti-nausea medicine if I need it
- ☐ Warm blankets

Other: _____

DURING THE BIRTH

- ☐ Clear or lowered drape to see baby born
- ☐ Slow, 'gentle cesarean' birth if possible
- ☐ ECG pads placed off my chest for skin-to-skin
- ☐ One arm free to hold baby
- ☐ Partner announces the baby's sex
- ☐ Photos / video when permitted
- ☐ Delayed cord clamping if baby is well

Other: _____

RIGHT AFTER BIRTH

- ☐ Skin-to-skin in the operating room
- ☐ Partner does skin-to-skin if I can't
- ☐ Newborn checks done next to me
- ☐ Keep the placenta / cord blood donation

Other: _____

IF BABY NEEDS EXTRA CARE

- ☐ Partner goes with baby
- ☐ Bring baby to me as soon as possible
- ☐ Photos for me if we're separated
- ☐ Help me hand express or pump colostrum

RECOVERY

- ☐ Baby stays with me in recovery
- ☐ Breastfeed / chestfeed in the first hour
- ☐ Remove the catheter as soon as allowed
- ☐ Help me get up and walk early
- ☐ Regular pain relief on a schedule
- ☐ Help lifting baby for the first days

Other: _____

NEWBORN CARE

- ☐ Do newborn checks with baby on my chest or in the room
- ☐ Please ask us before any procedure or supplement
- ☐ Vitamin K injection
- ☐ Antibiotic eye ointment
- ☐ Hepatitis B vaccine before we go home
- ☐ Delay the first bath (ideally 24 hours or more)
- ☐ Circumcision (if a boy): yes / no / undecided
- ☐ Baby rooms in with us

Other: _____

VISITORS AND GOING HOME

- ☐ Limit visitors until we say we are ready
- ☐ Partner stays overnight
- ☐ Quiet time for rest and feeding
- ☐ Explain my pain relief plan before discharge

NOTES