



Boulder Community Health  
**Family Birth Center**  
**Birth Plan Guide & Template**

A birth plan is a valuable tool for communicating your desires for your labor, delivery and post-partum time with your care team. While you are here, we will involve you at every decision point along the way.

**What to expect at the Family Birth Center**

**Labor:**

- Our nurses are experienced with—and supportive of—non-medicated labor, including Hypnobirthing and the Bradley Method.
- Support people, including doulas, are welcome and encouraged.
- You are free to move around during labor, thanks to telemetric monitoring.
- You may wear your own clothes.
- Bring your own music, speakers and LED candles or lights, if you'd like.
- You will have access to helpful labor tools and props.
- Each birthing room features a Jacuzzi tub and shower for privacy and pain management.
- Our nurses have been trained in stress-relieving aromatherapy.
- We offer nitrous oxide during labor— a safe pain-relief option that moms control themselves.

**Delivery:**

- We encourage you to try various pushing positions.
- We delay cord-clamping, so your baby stays skin-to-skin right away.

*If you have a Cesarean section:*

- Your main support person is welcome to stay with you in the operating room.
- Your baby will be skin-to-skin with you immediately after birth.

**Postpartum:**

- You will be in a private room with a queen bed and beautiful views.
- Newborns stay in the room with mom full-time, unless they need special care.
- Trained nurses provide breastfeeding support 24 hours a day. We will teach you to recognize feeding cues and soothe your baby in ways that won't interrupt your breastfeeding experience. For instance, we do not offer pacifiers or sugar water, per Baby Friendly recommendations.
- Donated breast milk is available, if medically needed.

**Special Care Nursery:**

Should your newborn need extra medical attention, you will always be nearby. Parents and babies stay in adjoining rooms in a private suite until everyone's ready to go home.

**Birth Plan for \_\_\_\_\_**  
(fill in your name)

I would like these people to be present at the birth:

\_\_\_\_\_

During labor, I would like to try:

- Non-medicated birth
- Laboring in the bath tub
- Epidural
- Nitrous oxide
- \_\_\_\_\_

I would like \_\_\_\_\_ to cut the umbilical cord.  
(name of loved one or your care taker)

I would like to take my placenta home. / Please dispose of my placenta. (Circle one.)

I would like my baby to have these medications after birth:

- Vitamin K shot
- Erythromycin ointment
- Hepatitis B vaccine
- No medications

I plan to breastfeed. / I plan to formula feed. (Circle one.)

**Visitors List** - Please email this list to: [FBCconciierge@bch.org](mailto:FBCconciierge@bch.org) before you get the hospital.

People who can visit my room anytime:

\_\_\_\_\_

\_\_\_\_\_

People I do not want to visit my room:

\_\_\_\_\_

Additional requests:

\_\_\_\_\_

\_\_\_\_\_