## **Questions for your potential Care Provider**

This is a handy worksheet to bring with you to make notes when you interview potential care providers (OB, Midwife, Family Doc, etc). Some of these may be answered by their website or patient handouts, and many of them may not apply to you. However, it is always nice to have a checklist of questions so that you don't forget! I recommend highlighting or starring the questions that you find most important, and crossing out those that don't apply to you, just in case. If you are asking questions, it's always good to use an open-ended question rather than yes/no questions... such as "How often do you....?", "How will you support us if....?", or "What are your policies regarding....?"

If you are expecting multiples - don't be afraid to add "Does any of this change with multiples?" to your list.

Before	e you arrive:
	Is the provider covered by my insurance plan?
	What hospitals (or birth centers) do they deliver at?
	If possible - Check with the local hospital for statistics on the provider's epidural rates, cesarean rates, VBAC rates, induction rates, etc.
On vo	our Visit:
On yo	How long have you been practicing? How many births have you attended?
	What is your cesarean rate? And what are the main reasons that you perform them?  (WHO guidelines recommend a cesarean rate of no more than 10-15% for optimal maternal and neonatal outcomes)

Do you perform VBACs? (Vaginal Birth after Cesarean)	-
<ul> <li>Is this a private or group practice? If it's a group practice, who will attend my delivery?</li> <li>a private practice - who is on-call when the doctor is not available?</li> </ul>	If it's
How much time do you allow for each prenatal visit?  (Depending on the model of care, prenatal visits can vary from 15 minutes to well over an hour.)	-
What type of childbirth classes do you recommend? Do you offer these, or do you reference other professionals? Are there certain methods that you do not support?  (Private classes are typically more personalized and in-depth than hospital classes. Some providers do NOT with Bradley/Lamaze clients - this can be a red flag if you are wanting a physiologic birth.)	
• Are you comfortable working with a doula if I choose to hire one? What do you see as benefits to your clients or to you of working with a doula? Any disadvantages?	the
What are your after-hours policies? Are you available by phone/text/email between visits? there a nurse who can provide advice/answers?	Or is
How do you feel about birth plans?	-

What is the typical protocol regarding Group B Strep? Is a rapid test available? If I test positive, how often will antibiotics be administered? Will a positive test affect any other part of my labor care or progress?
Will you always ask my permission before performing procedures such as stripping membranes or amniotomy?
Do you require that your patients get an IV when they arrive? How do you feel about a saline lock?
What are your views about pain medication during labor? What about natural childbirth? How comfortable are you with alternative comfort measures for pain management?
What is your experience with unmedicated birth? What are your views on pain management during birth, both medicated and unmedicated? Will you recommend or be comfortable with different positions and coping techniques?
What percentage of your patients get epidurals? What is your view on epidurals?
• What are your feelings about induction of labor? For what reasons do you typically recommend induction of labor? Do you routinely practice non-medically indicated inductions? Would you be comfortable letting me go past 41 weeks if there are no complications? (WHO guidelines do not recommend induction of labor before 41 weeks gestation for women with an uncomplicated pregnancy.)

How do you feel about patients declining vaginal exams during labor? How often do you typically prefer to have them performed?
Do you routinely use pitocin? (synthetic oxytocin) How often, and for what reasons?
What are your procedures regarding epidurals, episiotomies, and assisted deliveries?
How do you feel about long labors (over 24 hours?) Would you be comfortable letting labor continue on its own if mother and baby are still doing well? How long will I be able to labor after my water breaks if there are no signs of infection?
• Are you comfortable with non-recumbent pushing positions for the second stage of labor? What positions do you prefer? Standing/squatting/kneeling/hands-and-knees/supine/lateral/etc? (Upright birth positions take advantage of gravity, widen your pelvis, and reduce your chance of vaginal tearing.)
How do you feel about delaying cord clamping?  (Most hospitals wait for 30 seconds, WHO recommends at least 60 seconds for prevention of iron deficiency in newborns.)

Does the care provider make you feel relaxed? Do they seem supportive of your decisions?
Did they answer all of your questions? Did you feel rushed?
Do their views on pregnancy, childbirth, and medical care align with your own?
Was the office nice and clean?
<ul> <li>Does it seem like they are super-medicalized, or do they lean toward a more natural route?</li> <li>What do you prefer? Do they tend to be someone who will take control of the progress of labor or will they allow the mother to take the lead?</li> </ul>

After your Visit (Reflection):