

# Questions for your potential Birth Place

*This is a handy worksheet to bring with you to make notes when you take a tour of your birthplace. Most of these questions will probably be answered by your care provider or tour guide, 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 you arrive:**

- Is the birthplace covered by my insurance plan? \_\_\_\_\_
- How far from your home is the birth place? \_\_\_\_\_
- How long will you plan to stay home during the early stages of labor? How and when do you plan to transfer?

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## **On your Tour:**

- How many births take place here on an average day? How many are caesarean births? How many are VBACs? How many are unmedicated? How many are induced? What induction methods are used most often?

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- What is your cesarean rate? And what are the main reasons that you perform them?

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- How many people can be in the delivery room at once? Does that number change during Flu Season? Is there a place for my partner or birth team to rest? Are my older children welcome during labor and birth? Do you have policies in place for unwanted visitors?

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- How often do you see doulas or birth photographers attending births? What are the facility's policies around birth photography? What are the facility's policies around doulas? Is there any paperwork that either will need to sign? Are there any situations that may take me away from my birth partner and/or doula? (i.e. epidural administration, cesarean birth prep, triage, etc.)

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- How many nurses/midwives/OBs are on during a shift? How long are shifts and at what times do they end?

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- How often are students or residents present during labor? Can I decline their presence if I change my mind about their attendance? Who should I contact if we need to explore a staff change?

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- Will I be in the same room for birth and recovery? Will I ever share a room with another family? Are TVs and internet access available?

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- What does triage look like — is there a special triage area or will a private labor room be used? Will my partner and doula be allowed to stay with me? Under what circumstances would I NOT be admitted (i.e, would I be encouraged to leave at under 4 or 6 cm dilation, or a certain contraction pattern like 4-1-1)? How often is there a significant wait for an open labor room?

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- Can I opt for a Hep-lock instead of an IV (or nothing at all)? Can fluids be administered intermittently? Can the IV be disconnected after a course of fluids, antibiotics or Pitocin are finished, or turned off? Will I still be able to use water therapy with an IV placed?

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- 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?

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- Am I encouraged to eat and drink during labor? Under what circumstances would I not be permitted to eat (i.e. with an epidural)?

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- What is the typical protocol for fetal monitoring and how often will you do it? How many wireless telemetry or handheld doppler systems are available and are they waterproof? How often do you use internal monitoring and under what circumstances?

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- How often are vaginal checks usually performed? When is a vaginal check not recommended (i.e. ruptured membranes)?

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- Will a shower be available to me, and if so where is it located? How many birth tubs are available? How often and how long may I use the tub? Will I have to leave for fetal monitoring? How long does it take to set up and/or clean the tub between uses? What are the circumstances where I wouldn't be able to labor in the tub (i.e. ruptured membranes)? Am I able to birth in the tub?

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- What options, aside from epidural, do you offer for pain management (i.e. narcotics, nitrous oxide, sterile water injections)? What options do families choose the most often? Is one method suggested over the others? Are there wait times to be considered? What are some of the most common side effects you see for mother or baby (i.e. Will baby need special observation if narcotics are administered less than 4 hours before birth?)

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- What is the average wait time for an epidural? Does that change during the night, weekends or holidays? Can my epidural be turned up or down at any point? Does that require my anesthesiologist or OB, or can the nurses do so? What are the most common side effects you see for mother or baby?

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- What birthing tools are available (i.e. birth ball, peanut ball, squat bar, mirror, birthing stool)? Which tools are requested most often? How often do you see families bringing their own tools (such as a TENS unit, essential oils, rebozos, birth balls, heating pads)?

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- Will I be encouraged to move freely throughout labor (walking, squatting, lunging, using birth balls/stools)? Will I need to stay in my room, on the L&D floor, or may I use the facility grounds?
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- How will you support me during pushing? Will I be encouraged to “labor down” during the latent part of the pushing stage of labor? How long to first-time families usually push and is there a standard time-limit for pushing? How often do care providers give perineal support or counter pressure with warm compresses during crowning? What is typically used for lubricant (baby soap, Astroglide/KY)? How often are episiotomies performed? How often do you see women experience vaginal tearing significant enough to require repair?
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- In what positions do you see women giving birth most often (on their back, on their side, on all fours, kneeling, squatting, upright, on a birth stool, in the tub)? In which positions do you see the least instance of tearing? The most tearing?
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- How long do you usually leave the cord intact after birth? How often do families choose to wait longer than 4 or 5 minutes? What are the policies for the third stage of labor and what techniques are usually used to encourage the placenta to detach? Is immediate postpartum Pitocin administration standard policy? After how long is a placenta considered “retained”?
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- Will my baby be placed skin-to-skin immediately after birth? How soon will we be encouraged to begin breastfeeding?
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- If there are problems with the delivery, or with the baby, are you equipped to handle an emergency?
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- In the event we experience a cesarean birth, how many support people can be present? Are doulas/photographers welcome in the OR or can they be on standby to swap out if my support person leaves with the baby? Is skin-to-skin and breastfeeding encouraged in the OR? May I have at least one arm free to hold my baby? What does a “gentle” or “family-centered” cesarean birth look like here?
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- What is the typical protocol for baby care immediately after birth? If my baby needs to be checked, weighed, or placed on a warmer, will he leave my room? How long are you comfortable waiting for examinations after birth? How long are you comfortable delaying baby's first bath? How often do families decline HepB, Vitamin K or erythromycin?

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- Is there a release form to sign should I choose to take my placenta home with me? If any tests need to be performed can just a small piece be sent to pathology instead of the entire placenta?

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- How will I be supported with initiating breastfeeding? Who will be there to guide me shortly after my baby is born? Is lactation support offered 7 days a week? Under what circumstances will formula or pacifiers be given? Will I be asked first? What kind of follow-up resources are available for breastfeeding concerns after discharge?

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- Will my baby be encouraged to stay in my room? On average how much time will a baby spend in the nursery? Are there any tests or procedures that would be required to be done anywhere other than my room (i.e. hearing screenings, circumcision)? Are there any options for baby care if I desire?

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- Is there a NICU at this facility? What level is it and what's the youngest gestation accepted? Where would we be transferred should we need a higher level NICU? What are the typical protocols for NICU transfers? Are there any circumstances where I might need to be transferred to another facility?

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- Are there specific visiting hours? Are there limits to how many people can visit at once? Do you allow young siblings to visit? Does a birth during Flu Season change anything?

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- What security measures are in place? Will a device be placed so that my baby is unable to leave the floor?

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- What kind of meal resources are available to me and my partner? What are the cafeteria hours?

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- What time does discharge typically occur? How long do families usually stay after an uncomplicated vaginal delivery or cesarean delivery?

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- What follow-up resources do you offer for new parents? How and when can I reach out for questions, concerns or emotional support?

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### ***After your Tour:***

- Does the birthplace seem clean? Do you feel comfortable in the rooms?

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- Is the staff friendly and courteous?

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- Does your care provider make you feel relaxed? Do they seem supportive of your decisions?

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*If you are planning a VBAC, be sure to include these questions as well:*

*<http://vbacfacts.com/2009/06/06/interviewing-care-providers-questions-to-ask/>*