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Birth Plan for
Kimberly Manning
Patient of Vicki Nolan, CNM

The following birth plan is provided in order to facilitate a smooth and efficient working relationship with our labor and post-partem medical care providers.

Labor Support Team:

Partner and coach: Carmen Rau

Additional support: Linda McCracken and Nadya Lawson

Emergency Medical Proxy: Carmen Rau

Back-up Medical Proxy: Consensus decision by both Linda McCracken and Nadya Lawson

Administration of Medical Procedures

So that communications between the mother/labor attendant team and medical care team(s) remain open and productive, it is requested that all care providers be aware of the following conditions:

1. All care providers should be introduced by name and position.
2. All procedures by consent only.
3. All procedures should be explained:
 - reason for procedure
 - what information it will provide or its anticipated outcome.
 - any side effects or potential harms to mother or baby.
 - how procedure is performed
 - what is expected from mother to facilitate its efficient administration.
 - Mother accepts exemption of routine procedures IE. Vital stats.
 - Mother does not consider internal vaginal exams or fetal monitoring routine and request that they only be performed by her attending Mid-wife.
4. No medication shall be administered with out consent.
5. Serious consideration to the following should be applied to the following before any offer of analgesic or anesthesia is made:
 - Mother is hypersensitive to most medications, particularly those that effect pain reception or muscular motor control.
 - Mother finds the effects of, the administration or potential for administration of analgesic or anesthetic substances extremely anxiety provoking.
 - It is requested that any offer or administration of pain medication or Anesthesia be made only in the event of emanate medical threat to mother and/or child and that unconsensual administration only be performed only in the event that justifiable life-threatening emergency medical intervention on behalf of mother or child is required.
 - Administration of a novocaine local in the event of post-partem paronial ? repair is not at issue.

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6. No administration of medication to induce or stimulate labor. Mother has a maternal family history of precipitous labor.
7. Episiotomy only if necessary.
8. In the event of an emergency C-section:

Birthing Room

- respect for our sense privacy
- No admittance of anyone wearing strong perfume or colognes.
- use of birthing room with whirlpool if available
- use of birthing stool if available
- consumption of clear liquids during labor

Upon Delivery

- Baby to breast right after birth
- Immediate skin to skin contact with baby
- Delayed clamping of umbilical cord, until pulsation ceases.
- Delay of erythromycin eye drops
- Delay of Vitamin K shot
- Delay of PKU blood draw
- No medicinal induction or stimulation to speed delivery of placenta.

Post Partem

1. Rooming in of baby
2. In the event baby is in the nursery:
 - no glucose water or formula to baby
 - Demand feeding of baby.
3. All baby exams at bedside or in the presence of a Parent, Kimberly Manning or Carmen Rau.
4. Administration of any medical procedures to baby with the consent of and in the presence of a Parent Kimberly Manning or Carmen Rau.