

## BETH ISRAEL DEACONESS MEDICAL CENTER LABOR & DELIVERY GUIDELINES

As you prepare to deliver at Beth Israel Deaconess Medical Center, keep in mind these general guidelines. Please review any questions you may have with your provider.

### **Labor Partner**

BIDMC does not restrict how many people can be in the labor and delivery room, but we encourage you to be thoughtful about who would be most helpful—people in the room should be supportive and comforting to you.

### **Laboring Options & Props**

We encourage you to be mobile and active throughout your labor, using the showers and birthing balls and assuming whatever position is most comfortable as your labor progresses. We will need to monitor the baby regularly, and if there is any concern for the baby's well-being, we may need to monitor the baby more often, which may limit your mobility.

### **Immediately After Delivery**

After delivery, we encourage 60 minutes of skin-to-skin contact between you and your baby. During this time, we encourage you to try breast-feeding as soon as possible, if it is your preference to breast-feed. After that time, the baby will go to the nursery briefly to have vital signs checked while you are moved to the postpartum room. When you are ready for transfer you, your baby and your support person (s) will be transferred to the postpartum room together.

### **Rooming In**

We have a family-centered approach to care at BIDMC and encourage having your baby room-in with you and your partner or support person during your hospital stay. Visitors are welcome at any time, at your discretion.

### **Feeding Baby**

How you decide to feed your baby is your choice, and we will work with you and your partner to best meet your feeding goals, whether that is using breast milk, formula, or both. We do not give pacifiers or supplemental feedings to a baby without discussing it with you first.

### **Common Concerns**

Episiotomies are not routinely performed unless deemed necessary by your doctor at the time of delivery because of concern for the baby's or your well-being. If needed, it will be discussed with you at the time of delivery.

Emergency Caesarean Sections are rare; however, if you need an emergency caesarean section, your doctor will discuss it with you first, explaining why one is needed, the risks and benefits, and the next steps.

In some cases, a baby may need to go to the Neonatal Intensive Care Unit (NICU) for treatment before the 60 minutes of skin-to-skin time is completed. If your provider team determines this is in your baby's best interest, they will keep you updated on what is happening.

Given this general information, if you have any specific requests, please write them on the attached **Birth Preferences Worksheet** and discuss them with your provider at your 36-week appointment.

**BETH ISRAEL DEACONESS MEDICAL CENTER  
BIRTH PREFERENCES WORKSHEET**

Please complete this worksheet if you would like to share specific goals for your delivery or have requests that are not consistent with BIDMC's guidelines, as outlined in the previous page. Please bring the completed document to your 36-week appointment to discuss with your provider.

Unless there are medical reasons not to, we would like to:

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Unless there are medical problems, we would like to avoid:

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After the birth, we would like to: \_\_\_\_\_

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