

## Preparing for Birth presented by Dr. John Ferguson, D.C.

Protecting the Rights of Pregnant Moms.

It has been my experience that many pregnant moms are often robbed of a wonderful birth experience because they haven't planned properly. Most pregnant women are not aware of the rights they have or the choices they need to make.

The pregnant mom has not only the right but also the responsibility to question what is being done to her and her unborn child. This should be her first concern, and I urge all "preggies" to take an active role in the decision-making process.

Compiling a "birth team" is the first step. A birth team can include: a chiropractor, prenatal counselor, obstetrician, physician midwife, doula (labor and birth support coach), breastfeeding counselor or postpartum counselor. These members can be an invaluable resource to a pregnant mom but may differ depending on the location of birth.

There are six stages of preparation in the birth plan:

- 1: <u>The onset of labor</u>: Will it be spontaneous or self induced? At home versus medical or surgical induction?
- 2: <u>Farly labor</u>: When should you go to the hospital or birthing center? Wear own clothes or hospital drab? Should a prep be done? Shaving of none? Should you have an enema? None, self administered at home or at hospital. <u>Empty</u> bladder? Walk to toilet, bedpan or catheterization.
- 3: <u>During labor</u>: Your positions? Walking during active labor should be encouraged. Sitting on toilet facing the tank also works well. Presence of others? Spell out whom. Relaxation techniques? Hypno-birthing, breathing, focal point, visualization, soft music, dim lights or heating pad. Hydration/fluids? Vaginal exams: who performs them? Fetal heart monitor? (I have always found that this alone tends to increase parent panic and the incidence of Cesarean sections.) Pain relief? Relaxation, breathing, changing positions, medications or epidural block? When should medication be given? Augmentation of labor? Walking, position change, nipple stimulation or intravenous Pitocin drip.
- 4: <u>During birth</u>: Labor positions? Mother's choice, side, birthing chair, in water, squatting or stirrups? Speeding up birth? Gravity-friendly positions, prolonged pushing, episiotomy, self tear, forceps or vacuum extraction? Pushing? Prolonged, spontaneous or directed. Perineal care?

Episiotomy, anesthesia, stitches or ice packs after birth, etc. Ambiance? Lighting, noise level, music or persons present.

- 5: After birth: Cord cutting, who and how? A new Canadian study just found that leaving the umbilical cord attached/unclamped/uncut for an extra 2 minutes as the uterus contracts to deliver the placenta, it delivers the rest of the "left-over" blood that the baby needs, which is rich in iron, white blood cells and immunoglobulins; in addition, it protects the baby against breathing irregularities, and anemia for weeks and even months. Chiropractic care? If you would like the baby checked immediately after birth, you should state this clearly and let Dr. John know. Airway suction? No, or if needed. Warmth and bonding? Baby's skin placed next to mother or warming table. Baby kept with mother? Rooming in or in nursery. Eye care? Silver nitrate placed in eyes of newborn? (This is a barbaric ritual that assumes that all women have gonorrhea.) Vitamin K injection? (Linked to liver failure and jaundice in newborns.) Feeding? Breast, bottle, sugar water or on demand. Circumcision? Ask why. (Latest research indicates no benefits.) Discharge from facility? When?
- 6. <u>The unexpected</u>: Caesarean section? Timing, planned or emergency. Presence of partner, video or screen used? Contact with baby afterwards, doula present or midwife? Premature? Neonatal Unit? Where? Feeding, visiting, support group? Death of baby: contact with baby or photos. Who, when and where?

These are realistic issues that need to be thought about. I have always felt that it is better to err on the side of caution. After the birth plan is completed, it should be given to every team member so that each is aware of the parents' wishes and it becomes a binding agreement.

As a chiropractor, I play an important role in the care of a pregnant mom- from simple pain relief to providing an environment for mother and child that can enhance labor and delivery and optimize the healthy expression of the newborn. I am connected with a network of alternative healthcare providers to ensure you have the best birthing experience possible. I have taken care of dozens of pregnant moms, their newborns, kids and families and have done extensive training and research to provide your family the most optimum health – naturally! Should you have any questions, you are welcome to call our office or check out our website for additional information.

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