



Questions to ask your Care Provider

1 - What are your credentials and experience? (How many births have you attended and do you attend each month?)

2 - Who is your back-up, and will they support my birth plan if I were to have one?

3 - How often do I see you during my pregnancy and how long will prenatal appointments last?

4 - What is your philosophy about prenatal testing (such as Gestational Diabetes and Ultrasound)?

5 - Is there a limit to the number of people who can accompany me during my birth?

How do you feel about a labor support professional such as a doula or massage therapist joining my birth team?

6 - Will I be able to eat and drink in labor?

7 - If I were interested in having a natural, un-medicated birth, how would you feel about it?

8 - What comfort measures do you recommend?

- Freely changing positions and walking around
- Water therapy (shower/tub)
- A doula
- Epidural
- Narcotics (Stadol/Demerol)

9 - What would you recommend I do if my water breaks before contractions have begun? How long after my water breaks would you recommend induction if my labor doesn't start on its own?

10 - What are your protocols regarding my due date, i.e. inducing labor at 40 weeks? 41 weeks?

11 - Do you believe in active management of first stage of labor? For example, would, progress of less than one cm per hour call for artificial rupture of membranes (AROM) or Pitocin? If everything is fine with me and my baby, will I be able to labor at my own pace and for as long as I need?

12 - What is your cesarean rate? What factors do you believe contribute to that rate? What is your VBAC rate? What are your standard protocols for VBAC mothers?

13 - How do you define "High-Risk" and what happens if I am labeled as such?

14 - Will I be able to choose the position in which I will push and give birth such as, side-lying, all fours or squatting? (Follow up if interested: Do you offer an option for a water birth?)

15 – If you feel that labor has to be stimulated what methods do you recommend?

- Herbs
- Nipple stimulation
- Castor oil
- Intercourse before spontaneous rupture of membranes (SROM)
- Enema
- Acupuncture
- Stripping of membranes
- Artificial rupture of membranes (AROM)
- Pitocin

16 – What is your protocol regarding the following procedures and how often do you perform them?

- IVs
- Continuous versus intermittent fetal monitoring
- Internal fetal monitoring
- Artificial rupturing of the membranes
- Epidural
- Assisted vaginal delivery (forceps/ vacuum)
- Episiotomy

17 – Can my baby remain with me at all times from the moment of birth? Do you support skin to skin contact between me and my baby immediately after birth? (Follow up if interested: How do you support initiating breastfeeding? Can I do delayed-cord clamping? How do you feel about declining certain routine infant care procedures such as administering erythromycin eye drops?)

18 – What newborn screenings or tests do you administer?

19 – What visits do I have with you in the postpartum period?

20 – (For home birth midwives) How long will you stay with me after my baby is born?

21 – (For home birth midwives) What kind of emergency equipment do you carry?

22 – (For home birth midwives) What is your rate of transfer to the hospital? What hospital do you transfer to? Who are your consultant obstetricians? Will I be able to meet or interview them? What is your relationship with the local hospital? Does it have a Neonatal Care Team/Unit?