

Birth Options

Questionnaires for a

Discerning Childbirth

Compiled by

Pauline Dillard....and....Vaughn Marie Rodriguez

Table of Contents

Prayer Team Questionnaire	1
Childbirth Instructor Questionnaire	3
Child Birth Assistant/Doula Questionnaire.....	5
Birthing Facilities Questionnaires.....	8
Home Birth	8
Freestanding Birth Center (FBC)	8
Hospital	10
Birthing Care Provider Questionnaires.....	14
For all Care Providers.....	14
Additional Questions for All Midwives	19
Home Birth Midwives	20
Home Birth and FBC Care Provider	20
Additional Questions for All Doctors	21
General Practitioners (GPs)	21
OBs and Forceps/csection certified GPs.....	21
Pediatric Care Provider Questionnaires.....	23
Red Flag Statements	26

Prayer Team Questionnaire

For the ministry of this service is not only fully supplying the needs of the saints, but is also overflowing through many thanksgivings to God.

Because of the proof given by this ministry they will glorify God for your obedience to your confession of the gospel of Christ, and for the liberality of your contribution to them and to all, while they also, by prayer on your behalf, yearn for you because of the surpassing grace of God in you.

Thanks be to God for His indescribable gift! 2Corinthians 9:12-15

It is important when choosing a prayer team that everyone understands the expectations and needs in the same way. There are three sections to this questionnaire. The first is for general information that applies to all prayer team members you are considering. The second is to help you choose people who will pray for you as you work through the decisions for your birth. The last is for choosing people who will pray while you are in labor. These teams may or may not consist of the same people.

General Questions

Name _____

Address _____

Telephone Number _____

Church Affiliation _____

How long have you known this person? _____

Are you born-again? _____

How did you come to know Jesus? _____

Do you believe that God communicates with us today through Jesus Christ? .

Do you believe that the gifts of Holy Spirit are active today? _____

Planning Prayer Team

Would you be willing to pray for us as we sort through the available birth options? _____

What are your feelings about home birth? _____

How do you feel about midwives? _____

What birth setting do you believe is best and why? _____

Does any of the available birth options cause you to feel fear? _____

Will these feelings affect how you would pray for us? _____

Are you willing to be open to God working changes in you during this time?

Are you willing to share with us anything you believe God has shown you about our birth plans? _____

How much time can you devote to this process? _____

Labor and Birth Prayer Team

Do you believe that God will fulfill our birth plans? _____

Do you have any fears or prejudices about the birth choice(s) we have made? _____

If yes, do you believe you can set your own fears aside and prayerfully support our birth plans? _____

Are you willing to let God do a work in you during our birth? _____

Are you willing to pray specifically as the need may arise? _____

Are you available any time of the day or night? _____

If not, when are you available? _____

Childbirth Instructor Questionnaire

Let not many of you become teachers, my brethren, knowing that as such we shall incur a stricter judgment. James 3:1

Name _____

Address _____

Telephone Number _____

Email address & website _____

Educational Affiliation _____

Are you certified? If so what are your certifications? _____

How long have you been teaching? _____

How many couples do you allow in each class? _____

What is the cost of your class? _____

What materials, if any, are included in that price? _____

Are there other materials you would recommend in addition to what you supply in your class? _____

If so, what? _____

Are you willing to barter any of the cost of the class? _____

Do you take payments? _____

What is the cesarean section rate from your classes? _____

What is the episiotomy rate? _____

What percentage of the women you work with birth without:

an epidural? _____

any other type of pain relieving medication? _____

What do you like best about being a childbirth educator? _____

What do you like least about being a childbirth educator? _____

Do you also attend births? _____

If yes, would you be willing to take the time to answer more questions about your birth assisting? _____

How do you view the dad's role in birth? _____

What is the strongest emphasis of your class? _____

Do you allow older siblings or other support people to attend the class with us? _____

How would you meet the needs of older siblings, or other support people? _____

Do you recommend care providers? _____

Who would you recommend for a homebirth? _____

Who would you recommend for a hospital birth? _____

Would you be willing to give us a free "get acquainted" meeting? _____

Are you a Christian? _____

If yes:

Are you born-again? _____

How does your belief in Jesus manifest in your teaching? _____

Do you believe that the gifts of Holy Spirit are available to us today? _____

What gifts have been manifest in you? _____

Will you pray with us during the classes or when we are in labor? _____

Where do you attend church? _____

How long have you attended there? _____

What do you like about this church? _____

If no:

Do you have any spiritual or religious affiliation? If so, what? _____

How is this expressed in your teaching? _____

Would you be supportive of our born-again beliefs? _____

How you would support these beliefs? _____

Would you feel comfortable working with our prayer team? _____

Would you be willing to take the time to answer any more questions we may have? _____

Childbirth Assistant/Doula Questionnaire

And those who know Thy name will put their trust in Thee; For Thou, O LORD, hast not forsaken those who seek Thee. Psalm 9:10

Name _____

Address _____

Telephone Number _____

Are you certified? If so, with whom? _____

What birthing organizations are you affiliated with, if any? _____

How long have you been assisting birth? _____

What are your fees? _____

What are included in these fees? _____

Are you willing to barter any part of your fee? _____

Do you accept payments? _____

Would you be willing to give us a free "get acquainted" meeting? _____

How many prenatal visits do you schedule? _____

What do you do at these visits? _____

Would you help us write our birth plan? _____

How many postpartum visits do you schedule? _____

What do you do at these visits? _____

How many births have you attended? _____

What is the cesarean section rate from births you've attended? _____

What is the episiotomy rate? _____

What percentage of the women you work with birth without the use of an epidural? _____

Without the use of any pain relieving medication? _____
What do you feel is your number one job at a birth? _____

How do you view the dad's role at the birth? _____

How would you support older siblings or other relatives at a birth? _____

What are you unwilling to do at a birth? _____

What do you believe is most empowering for a woman: having her speak up for herself in labor, or her hiring someone to do it for her? _____

Will you advocate with medical personal if we so desire you to? _____

What would that look like? _____

Do you have any limitations on your certifications in your ability to speak up for us? _____

Are you a Christian? _____

If yes:

Are you born-again? _____

How does your belief in Jesus manifest in a birth? _____

Do you believe that the gifts of Holy Spirit are available to us today? _____

What gifts have been manifest in you? _____

Will you pray with us before and at the birth? _____

Will you read Scriptures to us? _____

Where do you attend church? _____

How long have you attended there? _____

What do you like about this church? _____

If no:

Do you have any spiritual or religious affiliation? If so, what? _____

How is this expressed at a birth? _____

Would you be supportive of our born-again beliefs? _____

How would you support these beliefs? _____

Would our praying or singing be uncomfortable for you? _____

Would you read Scripture to us? _____

Would you feel comfortable working with our prayer team? _____

Would you be willing to take the time to answer any more questions we may have? _____

Birthing Facilities Questionnaires

There is no one holy like the LORD, Indeed, there is no one besides Thee, Nor is there any rock like our God. Boast no more so very proudly, Do not let arrogance come out of your mouth; For the LORD is a God of knowledge, And with Him actions are weighed.

1Samuel 2:2-4

These questionnaires are designed to help you gain information about the birthing facilities in your area. Make as many copies as you need and take them on your birth center and hospital tours. If the tour guide is not able to answer all of your questions, schedule an appointment with them for a time when you will be able to get the rest of the questions answered. You may also want to call the labor and delivery area and ask if there is a labor and delivery nurse that would be willing to answer some questions, because what the tour guide tells you, may be different than what the labor and delivery nurses actually experience.

Home Birth

* See care provider questionnaires for home birth midwife questions

Free Standing Birth Center (FBC)

Name of Facility _____

Address _____

Phone Number _____

Who is the contact person who can answer a list of questions for me? _____

Telephone number of contact person _____

Is this facility licensed? _____

Is this facility accredited with the National Association for Childbearing Centers? _____

Names and phone numbers of care providers who have privileges at this facility _____

What is the easiest way to reach your facility from our home? _____

What are your fees? _____

Are you covered by our insurance? _____

Do you accept payments? _____

What interventions, such as pain relieving medications and synthetic oxytocin, are you licensed to administer? _____

What is the nurse to patient ratio? _____

Do you supply a birth assistant? _____

Are we required to use your birth assistant? _____

Can we bring in our own birth assistant? _____

Under what circumstances do you require a transfer to the hospital? _____

What is the most common reason for a transfer? _____

Which hospital would we transfer to? _____

How would a transfer be handled? _____

Would we be allowed to transfer in our own car or by ambulance? _____

What emergencies can you handle at your facility? _____

What equipment do you have for handling an emergency? _____

How long are we allowed to stay after the birth? _____

How do you do fetal monitoring? _____

What procedures are required? _____

Which can we refuse? _____

What situations would risk us out from using your facility? _____

Do you allow VBACs? _____

What do you supply (i.e. food, linens)? _____

What would we have to bring ourselves? _____

Hospital

General Information

Name of Facility _____

Date of Visit _____

Address _____

Phone Number _____

Name of person conducting your tour _____

What is the average cost of a normal birth? _____

Directions to the facility _____

Alternate route _____

Where is the best place to park?

During the day _____

At night _____

Which entrance should we use?

During the day _____

At night _____

What is the nurse to patient ratio? _____

How many births does your facility have per month? _____

Would you like us to attend any special classes other than our birth preparation course? _____

What admitting procedures can we take care of in advance? _____

What will need to be taken care of when we arrive in labor? _____

What are your usual prepping procedures upon admission? _____

Are there any changes or additions if mom is a VBAC? _____

How are incoming and outgoing calls handled? _____

What room options are available? (e.g., Labor rooms, LDRs, family birth rooms, private,

semi-private, etc.) _____

How many of each room are available? _____

Will we have to change rooms when it comes time to give birth? If so, to where? _____

At what point in labor would this happen? _____

Would our belongings have to go with us at that time? If so, where would they go? _____

How many people will I be allowed to have with me during labor? _____

During birth? _____

Will the dad and birth assistants have to change clothes for a normal birth?

If so, where would they do this? _____

Where is the bathroom the mom should use? _____

Which bathroom may the dad and birth assistants use? _____

If a cesarean was to become necessary, will the dad and a birth assistant be allowed to be in the operating room? _____

Even if the mom is under general anesthesia? _____

If you were having a baby, would you birth in this facility? _____

Why or why not? _____

If you were having a baby, which care provider would you use? _____

Why or why not? _____

Labor Management

What is the facility's policy on:

fetal monitors? _____

Are fetoscopes available for use? _____

If not, why not? _____

medications? _____

IVs _____

What type of medication is administered most often? _____

What percentage of moms come in to the facility desiring natural childbirth (this includes no drugs or episiotomy)? _____

Of those, what percentage actually accomplish this? _____

What percentage have epidurals? _____

What is your cesarean section rate? Primary? _____ Total? _____

What is your VBAC success rate? _____

Will the mom be allowed to wear her own clothes during labor? _____

Where will the mom be able to walk during labor? _____

Will the mom be free to choose positions for the birth? _____

What is the facility's policy on eating and drinking during labor? _____

Will the facility provide juice and food or should we bring our own? _____

Does the facility provide showers or hot tubs? _____

Where are they located? _____

What is the facility's policy on older children attending the birth? _____

What is the age limit for visiting siblings after the birth? _____

How long will we be able to stay in the room after the baby is born? _____

Will the family have a chance to bond undisturbed? _____

When and for how long? _____

Can you do all newborn procedures at the mother's bedside? _____

If not, why not? _____

Can vitamin K be given orally? _____

If not, why not? _____

Would we need to obtain a prescription from the pediatrician before the birth? _____

What newborn procedures are standard? _____

Can they be delayed? _____ For how long? _____

Will they allow the baby to stay skin-to-skin immediately following the birth, and for as long as mom or dad want, per the recommendations of the CDC? If not, why not? _____

At what birth weight do you implement hypoglycemic testing on the baby? _____

How will the facility handle us refusing any or all of these standard procedures? _____

What is the hospital's induction rate? _____

Does it vary by doctor? _____

Which doctor or midwife practicing at your facility has the lowest:

induction/augmentation rate? _____

Epidural rate? _____

Episiotomy rate? _____

Rupturing membranes rate _____

C-section rate? _____

If you are unable to answer these questions who can I talk that can? _____

Postpartum Care

What is the average length of stay after the birth? _____

Do you have 24-hour rooming-in right from birth? _____

If not, why not? _____

Will the dad be allowed to stay? _____

Will you supply him with some kind of bed? _____

What kind of breastfeeding support will be given? for a well baby? for a sick baby? _____

Birthing Care Provider Questionnaires

I, wisdom, dwell with prudence, And I find knowledge and discretion. The fear of the LORD is to hate evil, Pride and arrogance and the evil way, And the perverted mouth, I hate.

Proverbs 8:12-14

Depending on where God leads you to give birth, you can pick the questionnaires that will meet your need. The information on the questionnaires is grouped by topic. Look over the questionnaire and decide which questions are important to you. You should then ask the questions in whatever order is comfortable for you.

Call the care provider's office and tell them you have a list of questions that you would like to have answered. Find out when the most convenient time would be for you to do this. Some of the questions can be answered by the office receptionist, or nurse before you meet with the care provider. When you do go to the office, take note of the environment and answer the following questions for yourself.

Common Questions for All Birthing Care Providers

Initial Personal Observations

Does the office feel relaxed and friendly? _____

Is pregnancy and birth information available? (brochures, pamphlets, magazines, etc.) _____

Is the staff helpful and friendly? _____

Do they make eye contact? _____

Do they seem distant and busy? _____

How are the phones answered? _____

Are calls between visits encouraged? _____

Who handles the calls? _____

How soon are calls returned? _____

What is your initial reaction upon meeting the care provider? _____

Do they use titles—Dr., Mr., Mrs.—or do they invite you into friendship with first names?

Are your questions welcomed or answered in a defensive tone? _____

General Information About the Care Provider's Practice

Name _____

Address _____

Telephone Number _____

Where did you get your training? _____

How many births do you take each month? _____

What is the cost of your services? _____

Are you on my insurance plan? _____

How do you require the fees to be paid? _____

Will you barter any or all of your fee? _____

Will you accept payments? _____

Will medical information in my chart and/or test results be shared openly with me? _____

Do you have any vacations planned around my due date? _____

How long is the average prenatal visit? _____

What do you recommend I do to prepare for a healthy pregnancy and birth? _____

What information about your clients do you find helpful in preparing to work with them in labor? _____

Are you available for emotional support during prenatal visits or between visits if needed? _____

Have you worked with women who have a history of rape, sexual or physical abuse? _____

What would you do differently for those women? _____

Would you be receptive to us writing a birth plan? _____

Would you be willing to review our birth plan and initial it? _____

At what facilities do you have privileges? _____

What facility do you prefer? _____

Would you be willing to go to one of the other facilities? _____

Private Practice versus Group

Is this a private or group practice? _____

If a group:

How many care providers are in the group? _____

Are they doctors, midwives, combined? _____

Is there an "on call" schedule or do they attend their own births? _____

What percentage of your clients' births do you actually attend? _____

Do your partners practice in a similar manner as you? _____

What would you say are the obvious differences? _____

If private practice:

Who does your back-up if you are unavailable? _____

How can I get in touch with that person? _____

Would you have any problem with us interviewing them as well? _____

Prenatal Testing

Are you comfortable with clients refusing routine prenatal testing such as:

weighing in _____

urine tests _____

pelvic exams _____

doptone _____

ultrasound imaging _____

blood testing _____

AFP _____

gestational diabetes screening _____

CVS _____

amniocentesis _____

If there is diabetes in my family history, do you consider me at risk for GD? _____

At what points in my pregnancy would you want to do a pelvic exam? _____

What information are you looking for? _____

How would that affect my care? _____

Are you able to listen to the baby's heart rate with a stethoscope or your ear? _____

Labor Management

Do you allow your clients to eat and drink in labor? _____

Will we be allowed to walk around? _____

Will the mom be allowed to choose her own positions for pushing? _____

What is your episiotomy rate? _____

What is your cesarean section rate? _____

How many are first babies? _____

How many are for multiples? _____

Does your total rate include multiples and breeches? _____

How many are after induction attempt? _____

How many are scheduled? _____

What percentage are for large babies? _____

At what birth weight do you consider a baby to be getting too big? _____

How do you determine this? _____

What is your VBAC success rate? _____

What percentage of your clients desires natural childbirth? _____

Of those, how many actually accomplish it? _____

What percentage of your clients have epidurals? _____

What situations would prompt you to suggest a cesarean section? _____

Do you have any standard labor practices? If so, what and why? _____

Are any of these standards required by the hospital or birth center where you practice? _____

Would you be comfortable working with us if we refused these practices? _____

After labor begins, when do you want to be contacted? _____

When in the labor will you come? _____

Do you routinely administer synthetic oxytocin after the birth? _____

How do you manage the following situations:

premature rupture of membranes _____

cervical lip _____

slow dilation _____

breech presentation _____

posterior presentation _____

retained placenta _____

postpartum hemorrhage _____

Do you have any time limit on second stage (pushing)? _____

Will you support the dad cutting the umbilical cord? _____

Do you allow still and video photography of the birth, even if it is a cesarean? _____

Birth Education and Support

What birth education method would you recommend? _____

Are there any teachers you would recommend? _____

How would we contact that person? _____

What do you like about this teacher? _____

What do you dislike about this teacher? _____

Would you be comfortable working with a birth assistant we hire? _____

Is there anyone you would recommend? _____

How would we contact that person? _____

What do you like about this birth assistant? _____

What do you dislike about this birth assistant? _____

Postpartum and Newborn Care

Do I need to hire a pediatrician for the birth? _____

Whom would you recommend? _____

How would we contact this care provider? _____

What do you like about this care provider? _____

What do you dislike about this care provider? _____

Who will exam the baby after the birth? _____

Can we refuse the following newborn procedures?

eye drops _____

vitamin K _____

heel prick tests _____

If we choose to have these procedures, who would administer them? _____

Who fills out and files the birth certificate? _____

Spiritual and Religious

Are you a Christian? _____

If yes

Are you born-again? _____

How does your belief in Jesus manifest in the care you give? _____

Do you believe that the gifts of Holy Spirit are available to us today? _____

What gifts have been manifest in you? _____

Will you pray with us before and at the birth? _____

Will you read Scriptures to us? _____

Where do you attend church? _____

How long have you attended there? _____

What do you like about this church? _____

If no:

Do you have any spiritual or religious affiliation? What is it? _____

How is this expressed in the care you give? _____

Would you be supportive of our born-again beliefs? _____

How would you support these beliefs? _____

Would our praying or singing be uncomfortable for you? _____

Would you read Scripture to us? _____

Additional Questions for Midwives

All Midwives

What is your certification of licensure? _____

How did you obtain your training? _____

How long have you been a midwife? _____

What do you like best about being a midwife? _____

What do you like least about being a midwife? _____

Home Birth Midwives

Who comes with you to the birth? _____

What do they do? _____

What supplies and equipment will you bring to the birth? _____

What supplies and equipment will we need to get? _____

Are you comfortable attending a home birth with a VBAC? _____

What reasons for the previous cesarean would preclude you from doing a home birth? _____

What percentage of your VBAC clients complete birth at home? _____

Are routine labor procedures different for VBACs? _____

Home Birth and FBC Care Providers

What type of “emergency” can be handled at home or at the birth center? _____

Which would prompt a transfer to the hospital? _____

What doctor would you recommend for emergency back-up? _____

How do I get in touch with that doctor? _____

What do you like about that doctor? _____

What do you dislike about that doctor? _____

What hospital would you prefer to go to in an emergency? _____

Do you have privileges at this hospital? _____

How will this hospital receive a home birth transfer? _____

Do I need to pre-register at the hospital? _____

How would the transfer be handled? _____

What is your transfer rate? _____

What percentage of those transferred had a cesarean section? _____

Would you go to the hospital with us and stay until after the baby is born? _____

What is the most common reason for a transfer in your practice? _____

For Hospital Care Providers

How many hours after birth will you sign discharge orders? _____

Will you do middle of the night discharges? _____

Additional Questions For Doctors

All Doctors

How long have you been a doctor? _____

What do you like about being a doctor? _____

What do you dislike about being a doctor? _____

Why did you choose to do obstetrical practice? _____

Do you perform abortions? _____

General Practitioners (GPs)

Are you willing to be the baby's doctor as well? _____

If so, would you be willing to answer additional questions about pediatric care? _____

Are you certified to do cesareans or forceps deliveries? _____

If not, who would do a cesarean if necessary? _____

Would you stay in the operating room as the baby's doctor so we would not have to be separated? _____

Obstetricians and Forceps/Cesarean Section Certified GPs

What percentage of your patients have forceps or vacuum extraction birth? _____

Which are you trained to use? _____

What situations would prompt you to suggest a cesarean section? _____

What incision do you most commonly use? _____

What closure do you use? _____

What anesthesia do you prefer? _____

Would I be allowed more than one support person in the operating room? _____

How long would I be required to stay in the hospital? _____

What support will you give me for breastfeeding after a cesarean? _____

How will my recovery be handled? _____

Do you routinely section twins and breech? _____

Pediatric Care Provider Questionnaire

Seek good and not evil, that you may live; And thus may the LORD God of hosts be with you, Just as you have said! Hate evil, love good, And establish justice in the gate! Perhaps the LORD God of hosts May be gracious to the remnant of Joseph. Amos 5:14-15

General Information

Name _____

Address _____

Telephone Number _____

Where did you get your pediatric training? _____

Are you board certified? _____

Do you have any areas of specialty? _____

How long have you been a doctor? _____

What is the cost of your services? _____

Are you on my insurance plan? _____

How do you require the fees to be paid? _____

Will you barter any or all of your fee? _____

Will you accept payments? _____

What do you like best about being a doctor? _____

What do you like least about being a doctor? _____

Will medical information in my child's chart and/or test results be shared openly with me?

_____ Even when they are teenagers? _____

Birth Support

If we had a home birth, would you come to our home to do a well baby check after the birth?

At which hospitals do you have privileges? _____

Will you sign for early discharge if we desire? _____

Will you discharge the baby in the middle of the night if we choose to go home then? _____

Would you be willing to come to the hospital and be in the surgery room with us if we had to have a cesarean? _____

Would you then stay with us in the operating room so we would not have to be separated?

Newborn Procedures

Are you willing to order oral vitamin K? _____ For in the hospital? ____ For us to take home with us? _____

How would you treat jaundice? _____

Circumcision

Whether we choose to circumcise a son or not, would you be supportive of our decision? _____

Do you perform circumcisions? _____

Do you use anesthesia? _____

Do you strap down both arms and legs of the baby or just the legs? _____

Would you allow us to stay with the baby during the surgery? _____

Would you provide an area for the baby to be nursed immediately following the surgery? _____

When would you want to do the surgery? _____

Would you be willing to do it after eight days? _____

Would you support us doing this as a spiritual celebration? _____

Breastfeeding

What kind of breastfeeding training have you had? _____

Can you recommend a breastfeeding support group or organization? _____

What percentage of your clients are still breastfeeding at 6 months? _____

9 months? _____ 1 year? _____

Are you supportive of long-term breastfeeding, such as 2–3 years? _____

What would you do for me if I had cracked nipples? _____

Do you think a breastfeeding baby needs any supplements of water or formula? _____

When would you recommend introducing solids to our breastfeeding baby? _____

Do you think a breastfeeding baby should be fed on demand or on schedule? _____

If on schedule, what is your recommended time interval? _____

Immunizations

At what age do you like to begin immunizations? _____

Would you be willing to wait until our child is between six months and one year of age? _____

Will you work with us even if we refused part or all of the immunizations? _____

Hospitalization

If our child were ever to be hospitalized would you make arrangements for mom or dad to stay around the clock? _____

Would you make arrangements for older siblings to stay? _____

Would you facilitate communication with other care providers that might need to be involved? _____

Discipline

What do you think is the best way to discipline a child? _____

Would you be supportive of Biblical discipline applied in a loving manner as needed? _____

If the doctor says "no", then ask - what is your understanding of Biblical Discipline? _____

Spiritual and Religious

Are you a Christian? _____

If yes:

Are you born-again? _____

How does your belief in Jesus manifest in your care? _____

Do you believe that the gifts of Holy Spirit are available to us today? _____

What gifts have been manifest in you? _____

Where do you attend church? _____

How long have you attended there? _____

What do you like about this church? _____

Would you be willing to pray with us for the health of our children? _____

If no:

Do you have any spiritual or religious affiliation? What is it? _____

How is this expressed in your care? _____

Would you be supportive of our born-again beliefs? _____

How would you support these beliefs? _____

Would our praying or singing over our children be uncomfortable for you? _____

Red Flag Statements

Introduction

You should always interview a care provider before placing yourself under her care. Call the care provider's office and ask if you can have a free interview appointment. If she gives you a free interview appointment then schedule a time when both of you can go. Before going to your appointment review the care provider questionnaires and make copies as needed. While at your appointment, take the time to get the answers to all your questions.

Even if you are planning a home birth attended by a midwife, you will need to be aware of the following list of tactics used by care providers to control your decision making. Familiarity with these tactics is important for several reasons. It will help you evaluate if the midwife is operating from a true midwifery model (see page 22), or as a "mini doctor". You will also use this information while interviewing back-up physicians. If God does call you into Egypt, understanding these tactics will help you avoid unnecessary interventions. Each is defined and includes a sample statement made by care providers and a discerning thought to refute that statement.

Belief System (BS): These statements are made from the medical belief system. They will often be wrapped up in legitimate sounding information, but really have no basis in fact.

Example:

Care Provider Statement:

⇒ Ultrasounds are extremely helpful in determining your exact due date.

Discerning Thought:

There is no such thing as an exact due date: my calculations are just as accurate, besides the Lord may plan for my baby to grow 10 months, then what?

Coercion (C): These statements are designed to convince you to do what the care provider wants, regardless of your objections.

Example:

Care Provider Statement:

⇒ If you don't follow my advice, I can't promise the outcome for your baby.

Discerning Thought:

Doctors cannot guarantee outcomes regardless.

Fear (F): These statements are designed to play off your fears and get you to make decisions based on those fears, rather than what God would have you do. The care provider could also be revealing his own fears in these statements.

Example:

Care Provider Statement:

⇒ I'd like to do an ultrasound "just to see what's going on with the baby."

Discerning Thought:

In case of what? I can trust God to take care of me and my baby. Besides, even if they found something what could really be done about it?

Informational (IN): Informational statements are designed to either gather information about you, or convey information to you.

Example:

Care Provider Statement:

⇒ I'll come to the labor when it's getting close to delivery time, but I keep in contact with the nurses. Oh, and of course, it must be my on call day.

Discerning Thought:

Is this good information or bad?

Intimidation (I): These statements are designed to cause the parents to have doubts about their intelligence, reasoning and discernment.

Example:

Care Provider Statement:

⇒ Just let me be the doctor.

Discerning Thoughts:

I am going to the doctor for a service, just like any other service business. He should be willing to explain what he wants to do and why. He should treat our decisions with respect.

Manipulation (M): These statements are designed to manipulate you into doing what the care provider wants. These are most often used when you are not clear on what you want.

Example:

Care Provider Statement:

⇒ All my patients have IVs and fetal monitors because that is the safest way to **manage** a labor.

Discerning Thought:

A laboring woman does not need to be "managed" she needs to be under the control of the Master. Besides, just because "everyone" else has it doesn't mean I should have to.

Non Responsive (NR): These statements are designed to throw the focus off of the care providers skill and abilities and to distract you. Thus there is no real response to your question.

Example:

Care Provider Statement:

⇒ I only do cesareans when necessary.

Discerning Thought:

This tells me nothing about how quick the care provider is to decide a cesarean is necessary, or if he is willing to work with my labor.

Red Flag Statements

Each of the following "red flag statements" is an actual comment made by a care provider, either to us or our clients. We feel that they were warning signs indicating potential areas of conflict on the part of the care provider who made the comment. If red flags such as these come up in your interview you must take into account the context of the comment, tone of voice, and the posture of the care provider. Is he sitting and discussing these things with you, or is he standing with his hand on the door knob?

As you read through the red flag statements mark down the tactic(s) being used by the care provider; then write a brief discerning thought. By doing this exercise you will be prepared to hear these comments, or ones similar, and have a ready response for yourself. It is not necessary for you to challenge the care provider's position, but it is necessary for you to be able to interpret his response to get an accurate picture of the care you would receive from this person. No one will be 100% perfect, but this exercise will help you pinpoint where the care provider is coming from, and whether or not you can work with that person.

Prenatal Testing/Evaluation

⇒ Your pelvis IS small, and it seems like your baby is going to be really big.
BS / C / F / INT / INF / M / NR

⇒ Your pelvis seems to have projections and might be inadequate. We'll just have to see.
BS / C / F / INT / INF / M / NR

⇒ Your uterus seems very large/small, are you sure you know when you conceived?
BS / C / F / INT / INF / M / NR

⇒ When was your last period? Are you sure? Was the one before that normal?
BS / C / F / INT / INF / M / NR

⇒ I think we should do an ultrasound, just to be sure of your due date.
BS / C / F / INT / INF / M / NR

⇒ After all your "due date" changes throughout your pregnancy.
BS / C / F / INT / INF / M / NR

⇒ The ultrasound will also tell us where your placenta is.
BS / C / F / INT / INF / M / NR

⇒ Ultrasound has not been proven harmful for the unborn fetus.
BS / C / F / INT / INF / M / NR

⇒ When you're 14 weeks pregnant we're going to run another blood test.
BS / C / F / INT / INF / M / NR

⇒ This blood draw will tell us if your baby is retarded, or has spina bifida.

BS / C / F / INT / INF / M / NR

⇒ If the blood test shows anything out of the "normal" range then we will do an ultrasound, and probably an amniocentesis.

BS / C / F / INT / INF / M / NR

⇒ Between 6 and 7 months we'll have you tested for gestational diabetes.

BS / C / F / INT / INF / M / NR

⇒ All the women in my practice have the gestational diabetes test done because they don't want to take any chances with their babies.

BS / C / F / INT / INF / M / NR

⇒ Have you been reading books, or taking those "radical" birth awareness classes? They just lead to confusion.

BS / C / F / INT / INF / M / NR

Health and Nutrition

⇒ You shouldn't gain more than 26 pounds, because your baby will just get too big to deliver vaginally. Besides, you don't want to have a lot of weight to lose after the baby's born.

BS / C / F / INT / INF / M / NR

⇒ If you have a big baby you could have shoulder distocia and then the baby will get stuck on the way out.

BS / C / F / INT / INF / M / NR

⇒ You must cut your salt intake.

BS / C / F / INT / INF / M / NR

⇒ Oh, nutrition doesn't really have anything to do with toxemia.

BS / C / F / INT / INF / M / NR

⇒ I haven't noticed much difference between moms who exercise and those who don't.

BS / C / F / INT / INF / M / NR

Birth Plans

⇒ Just tell me what you want and I'll write it in your chart.
BS / C / F / INT / INF / M / NR

⇒ I only want what's best for your baby.
BS / C / F / INT / INF / M / NR

⇒ Don't worry, everything will be fine during delivery. I've been trained to handle any complication.
BS / C / F / INT / INF / M / NR

⇒ I see birthing like a crew on a ship. I'm the captain and everyone does what I say.
BS / C / F / INT / INF / M / NR

⇒ You don't need to bring anyone to help you. That's what the nurses are there for.
BS / C / F / INT / INF / M / NR

⇒ All breech position babies will have to be born by cesarean. It's the safest way to prevent brain damage, and besides, no one does vaginal breeches anymore. It's too risky. BS / C / F / INT / INF / M / NR

⇒ Anesthesia, including epidurals, has no effect on the baby.
BS / C / F / INT / INF / M / NR

⇒ We use an IV just in case.
BS / C / F / INT / INF / M / NR

⇒ It isn't a good idea to eat and drink in labor because studies show that the body doesn't digest anything in labor anyway. Besides, what if you need emergency surgery?
BS / C / F / INT / INF / M / NR

⇒ If I'm not on call my colleague will be there, and he's really trustworthy.
BS / C / F / INT / INF / M / NR

⇒ Studies show that if we don't do an induction by 42 weeks your baby has a higher risk of a suddenly dying.
BS / C / F / INT / INF / M / NR

⇒ You wouldn't want to risk your baby would you?
BS / C / F / INT / INF / M / NR

⇒ Why do you want to know my statistics, what could numbers possibly tell you?
BS / C / F / INT / INF / M / NR

⇒ I don't keep track of my statistics. They don't tell you anything.
BS / C / F / INT / INF / M / NR

⇒ Why are you asking me all these questions?
BS / C / F / INT / INF / M / NR

⇒ How many births have **YOU** been at? I've been to well over 5,000.
BS / C / F / INT / INF / M / NR

Newborn Care

⇒ Of course we have to suction the baby right away. You wouldn't want it to choke to death would you?
BS / C / F / INT / INF / M / NR

⇒ I think it's important for babies to spend some time in the nursery, just for observation.
BS / C / F / INT / INF / M / NR

⇒ Well, certainly you can do whatever you want, but if it were my baby I wouldn't want to take any chances.

BS / C / F / INT / INF / M / NR

Pediatric Red Flags

⇒ I feel so strongly about having children immunized, that when parents tell me their thinking of not immunizing I tell them to get another doctor.

BS / C / F / INT / INF / M / NR

⇒ Studies have shown that uncircumcised boys have more bladder and kidney infections than those who are circumcised.

BS / C / F / INT / INF / M / NR

⇒ The wives of uncircumcised men are more likely to get cervical cancer.

BS / C / F / INT / INF / M / NR

⇒ Scheduled breastfeeding is the best way to establish authority.

BS / C / F / INT / INF / M / NR

⇒ Home birth is extremely dangerous. I couldn't possibly support your decision.

BS / C / F / INT / INF / M / NR

⇒ I've seen babies born at home with meconium get really sick.

BS / C / F / INT / INF / M / NR

⇒ No, I will not give you an order for oral vitamin K because it isn't as effective as the injection.

BS / C / F / INT / INF / M / NR

⇒ No, I will not order PKU, Hypothyroidism or Galactosemia testing after you leave the hospital with the baby.

BS / C / F / INT / INF / M / NR

⇒ If you're telling me that you plan to use spanking as discipline I'll have to report it to child protective services.

BS / C / F / INT / INF / M / NR

⇒ If your nipples get really sore and we can't figure out what's wrong with them, you can just bottle feed.
BS / C / F / INT / INF / M / NR

⇒ Breastfeeding's fine the first few months, but I usually recommend weaning by about 6 months of age.
BS / C / F / INT / INF / M / NR

⇒ It's ok to start solid foods before 4 months of age. It may even help your baby sleep through the night.
BS / C / F / INT / INF / M / NR

⇒ I couldn't possibly stay with your baby if you had a cesarean. It's just too time consuming.
BS / C / F / INT / INF / M / NR

Vaginal Birth After Cesarean Care (VBAC)

Preparing for a VBAC is covered in *Life Issues That May Affect Your Labor*)

⇒ Let's have an ultrasound done to verify your dates. Then we can schedule your cesarean. BS / C / F / INT / INF / M / NR

⇒ We could give you a trial of labor, but look at what happened last time. Do you really want to go through that again? Besides, cesarean birth is better for you and your baby at this time.
BS / C / F / INT / INF / M / NR

⇒ Sure, we could try for a vaginal birth, but in my experience less than 50% of the women who try actually make it, and then your cesarean will be an emergency instead of safely controlled.
BS / C / F / INT / INF / M / NR

⇒ Sure, let's do a VBAC, but because you had a previous cesarean you'll have to have an IV, a fetal monitor, and a uterine pressure catheter.
BS / C / F / INT / INF / M / NR

⇒ Of course you won't be allowed to eat or drink anything, just in case.
BS / C / F / INT / INF / M / NR

⇒ You'll have to deliver in a regular delivery room.
BS / C / F / INT / INF / M / NR

⇒ You are aware that because of your cesarean your uterus could rupture during labor, aren't you? But if you want to take that chance with your baby...
BS / C / F / INT / INF / M / NR

⇒ We can go for a vaginal birth, but at the first sign of anything out of the ordinary it will be best to do the cesarean?
BS / C / F / INT / INF / M / NR

⇒ I wouldn't recommend spending your money on a birth assistant. If you have to have another cesarean they can't come in the delivery room with you anyway.
BS / C / F / INT / INF / M / NR

⇒ Because you're a VBAC you'll only be allowed to push for an hour or two.
BS / C / F / INT / INF / M / NR
