



# My birth plan letter

Name: .....

Personal identification number: .....

Due date: .....

Partner/Co-parent: .....

Information about my pregnancy that the care provider should know:

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This is what I look forward to experiencing during childbirth:

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My fears and worries before the birth are:

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How you can give me support and help during childbirth:

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This is how you can support my partner or co-parent:

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Here is my take on pain relief and handling pain during birth:

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This is how I think about birth positions and assistance during childbirth:

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Here's what we want it to be like and what we need after childbirth:

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Other requests:

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