

WHEN TO CALL YOUR DOULA

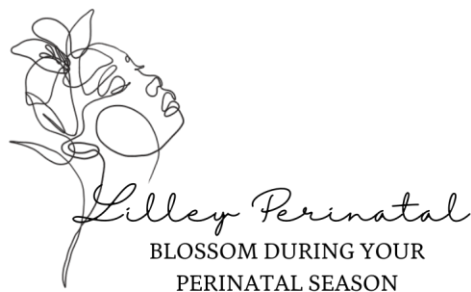
Once you officially hire Lilley Perinatal, **KEEP IN TOUCH**. Call/text/email updates after your prenatal appointments with your doc/midwife to let me know how things are going. If you have an internal exam, let me know how far dilated you are, how effaced and the station of the baby's head (if you know). Call/email/text me between 8:00am and 9:00pm if you have any questions or concerns.

AFTER 37 WEEKS: Between 7:00am and 10:00pm call/text to let me know of any possible pre-labor signs (losing mucous plug, more than average Braxton-Hicks contractions, contractions that start and stop, regular cramping, loose stools, etc.). While none of these are sure signs that labor is imminent, knowing what's happening with you will help me better prepare.

CONSULT YOUR CARE PROVIDER to devise a plan should your water break. Your water breaking as the first sign of labor isn't that common. This happens about 15% of the time. Nevertheless, we want you to know what to do if this happens to you in the middle of the night, in the middle of Target, or somewhere in between. Ask your doctor or midwife what they want you to do if your water breaks before labor begins. Some midwives will recommend staying at home for several hours to allow labor to begin. Other doctors will say that you should come to the hospital right away. If you are GBS+ and are planning on getting antibiotics in labor, most care providers recommend coming to the hospital as soon as the water breaks. And then there are some unique circumstances for certain people. The bottom line is that we would like you to know what you should do if your water breaks.

IF YOUR WATER BREAKS, call me. If all seems normal (and you're GBS -) and will be staying home until active labor begins, drink lots of fluids, eat, rest and wait for contractions to come on their own. If your water starts to trickle (few drops here or there, or you think you may be losing some urine) this could mean that your water is slowly breaking. As long as the liquid is clear and odorless, then you can proceed as normal (eat, drink, rest, go back to bed). If this is not your first baby and/or if you are known to have precipitous (very fast) labors, it is especially important to let me know of these signs.

CONTRACTIONS: If your contractions begin after 8:00pm and are very sporadic (1 every 10-20 minutes and lasting 20 seconds), call/text me to check in. I will tell you to eat dinner, hydrate, and go to bed. This can last for a few hours or a few days (early labor) so it's too soon for me to come over. By 10:00pm, if you are not already passed out, call/text me again to just check in and let me know how you're doing. If you can fall asleep, even just between contractions, that is the best thing to do. It will be your last opportunity to sleep for a long, long time! If you wake up between 12:00am and 6:00am because you are too excited to sleep, but you can handle the contractions easily and they are sporadic, very short, not very painful, try to go back to sleep or

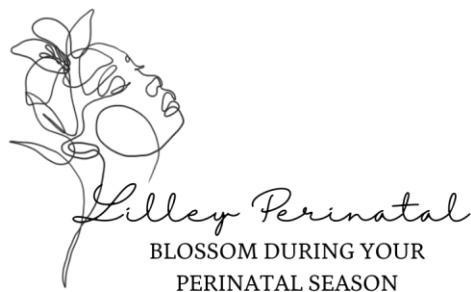


try to slow your labor by drinking a large glass of water and getting into a nice, long (40 minutes), warm, relaxing bath. Then try to sleep in between contractions. Let your partner sleep as a tired partner is not as helpful. You don't have to call/text me between these hours unless you have progressed with labor or you are freaking out and need to – then absolutely call me! Keep me posted throughout the morning via text or phone. Examples would be a text or call saying that all is the same, contractions are consistent, but still XX minutes apart, feeling good, going to rest, contractions are getting closer and are consistent, some mucous in my underwear, I have to stop and focus during each contraction, or partner is doing a great job helping me, but I think I will need more support within the next 2 hours. If in the middle of the night your contractions are strong, each lasting 1 minute, are 5 minutes or less apart, your water has gushed (take note of the color – Clear? Clear with some blood? Meconium stained?), call me and we will make a plan of where and when to meet. I'd rather receive a "false alarm" than be called at the last minute. Remember that I would ideally like to have 2 hours for time to get ready and drive safely to your home, hospital or birthing center.

If you call my primary line at **470-272-0643** and I don't answer on the first try, skip voicemail, hang up, and call again. If for some reason you cannot reach me after two calls, leave a voicemail. If you do not hear from me within 30 minutes, call your back-up doula, which will be arranged at least one month prior to your due date.

WHEN I WILL JOIN YOU: When your contractions are consistent (usually around 5-6 minutes apart), strong, lasting 1 minute each and you feel you need help getting through them, call me. I will head on over to your house and help you labor there before heading to the hospital. Your emotional and physical state is more important to me than the frequency of the contractions. I will come when you feel you really need help so don't wait to call me if you truly need me! If you would like for me to join you at home before heading to your place of birth, I will head to your house. If you would like for me to meet you at your place of birth, I will make arrangements to meet you there. If I am en route to your home and you leave for your place of birth, please call upon leaving to let me know.

TIMING CONTRACTIONS: *Start timing from the beginning of 1 contraction to the beginning of the next one – that will tell you how far apart they are. *Keep track of how long each contraction is lasting. *Check to see how consistent they are for a 1 hour period. *Call your doc/midwife when contractions are regular & strong (you can't talk thru it), about 4-5 minutes apart, each lasting 1 minute and are consistent for 1 hour. If you live far away from your delivery destination and/or this is not your 1st labor and delivery (subsequent labors usually move faster than the 1st), plan accordingly. While timing contractions, your partner should observe...if you are unable to talk through contractions, are focused on your breathing, are making low guttural sounds,



have the presence of more blood and/or mucous, and are feeling pressure down below, then you are ready to go.

WHILE LABORING AT HOME: Find a good balance of rest and activity as you'll need to do both. In early labor, rest. In active labor, be active. If laboring over night, get as much rest as possible. Especially in early labor, if you can sleep, then sleep - you'll be so glad you did later. Sing/talk to your baby – he/she will love it, even if you're tone deaf! Taking care of yourself means you're taking care of your baby. Be healthy! Do mindful relaxation exercises. If your mind is relaxed, your body can be relaxed too! Water is your friend! Take a long relaxing warm bath (or shower). Eat. Your body needs fuel for labor.

Early Labor: eat light protein, eggs, yogurt, veggies, fruit

Active Labor: eat simple sugars, Jello, Gatorade, saltine crackers, pastini/orzo, applesauce, bananas, ice pops, frozen fruit bars, coconut water, ginger ale

Remember that a tired team is not an efficient team. Everyone involved in a birth should try to be as rested as possible (including the mom!) Labor and birth can be, and usually is, a very long process. Getting to the hospital too early in the birthing process (if everything is normal) can use up a lot of unnecessary energy that will be needed later on. Going to the hospital too early also increases your chances for unnecessary interventions (ie fetal heart rate monitoring, epidural, Pitocin, etc). Laboring at home (your bed, your tub, your living room, dim lights, your food and drink...) is much more comfortable than laboring at the hospital/birthing center (small room, strangers in & out, little privacy, bright lights, lots of machines and lots of noise).