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The Birth Plan Reality Card

i had a birth plan. almost none of it happened, and the birth was still fine. this is not a warning list — it is the set of detours that are common enough to be worth hearing about now, from someone they all happened to, so the day itself is not the first time you hear the sentence.

1. **your water can break before labor actually starts**
   mine broke at 38 weeks and 3 days, at home, in bed. i assumed that meant the baby was coming. sixteen hours later i was still at one centimeter. once your water is broken there is a clock on it, because the risk of infection goes up the longer it is open — that is why pitocin ended up in my labor, and it is why i was in labor for twenty hours rather than the fast dramatic thing in the movies.

   ASK: how long after my water breaks would you want to start an induction, and what does that look like here?

2. **the epidural is not a guarantee**
   this is the one i wish somebody had told me. i have scoliosis. it took the anesthesiologist nine attempts to place the catheter, he told me it might not hold, and he was right — it worked beautifully for about an hour, then quit at seven centimeters. by the time it failed there was nothing anyone could do, and i delivered without it.

   ASK: if you have ANY back history — scoliosis, surgery, rods, an old injury — ask for an anesthesia consult while you are still pregnant. not mid-contraction. that appointment exists and almost nobody books it.

3. **you can fail the glucose test, and it is not your fault**
   i failed mine, and was diagnosed with gestational diabetes at 30 weeks. that meant pricking my finger four times a day, cutting carbs right back, and medication to keep my levels where they needed to be. it was a genuinely annoying adjustment and my son was born healthy. gestational diabetes is common, it is managed, and it is not a thing you did to yourself — which is what i needed someone to say to me at the time.

   ASK: if i fail the one-hour test, what happens next and how quickly can i be seen?

4. **somebody may say the cord is around the neck**
   the midwife said it out loud while i was pushing and it was the most frightened i have ever been in my life. it is common, the team sees it constantly, and they are not alarmed by it even when you are. there is no question to ask here. i just want the sentence to have existed before the day.

5. **you are not finished when the baby is out**
   there is still the placenta to deliver, and there may be stitches — i had two. nobody had mentioned either one to me and i had genuinely forgotten the placenta was a separate event. neither was bad. both were a surprise, and surprises are harder than they need to be.

So what is a birth plan actually for?

not for controlling the day. mine was useless as a script and would have been genuinely useful as a set of preferences. if i were writing one again:

— write preferences, not rules. "i would like" survives a change of plan. "i will not" does not.

— put your two or three non-negotiables at the very top. there are never ten.

— say who is allowed in the room, and who is not. this is the part people are shy about and it matters most.

— include what you want if things move fast — an unplanned c-section, a trip to the NICU. the page you do not want to write is the one worth writing while you are calm.

— give a copy to whoever is coming with you. on the day, you will not be the one doing the advocating.

PAGE TWO — KEEP THIS ONE ON THE FRIDGE

Call Now. Don't Wait And See.

in pregnancy these are the ones that do not wait until morning and do not wait for your next appointment. you will never be the person who called for nothing — they would genuinely rather see you.

- **bleeding, or fluid leaking**
  any vaginal bleeding, or a gush or trickle of fluid — especially before 37 weeks.
- **the baby's movements change**
  slowing down, or a pattern that is not their usual. do not wait it out overnight, and do not wait to see if a snack and a cold drink fix it.
- **headache, vision, swelling**
  a headache that will not shift, spots or flashing in your vision, sudden swelling in your face or hands, or pain high on the right side under your ribs. together or alone, these can be preeclampsia and they are urgent.
- **regular contractions before 37 weeks**
  timed, coming back, not easing when you change position or drink water.
- **fever or chills**
  especially if your water has already broken.
- **severe or constant belly pain**
  different from stretching or braxton hicks — pain that does not let go.

The number you should not have to look for

write your provider's after-hours number here now, while you are calm and not holding a phone at 2am:

The two things I would put in the bag

a peri bottle and a numbing spray. that combination was the single most useful thing i had in the first two days after giving birth, and it is the one piece of advice from my own birth story i still repeat to people. put them on the list now, because you will not be shopping later.

Questions for your next appointment

- ☐ how long after my water breaks before you would induce?
- ☐ do i need an anesthesia consult because of my back?
- ☐ what happens if i fail the glucose test?
- ☐ who will actually be in the room — my doctor, a midwife, whoever is on?
- ☐ what number do i call after hours, and who picks it up?

this card is one mother's experience — two pregnancies, gestational diabetes, an epidural that quit at seven centimeters — plus the warning signs worth having on a fridge. it is not medical advice and it is not a substitute for your own provider, whose answer beats mine every single time. — lia