

Gentle C-Section

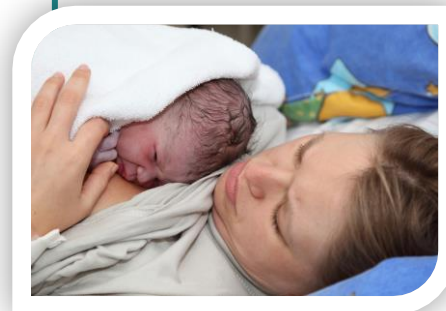
A **C-section** (cesarean section) is a surgery to deliver your baby. A **gentle C-Section** creates a special environment for your surgery so you can have an experience that is closer to a vaginal birth. Some people say it feels more like a birth and less like a surgery.

We can only do a gentle C-Section if—

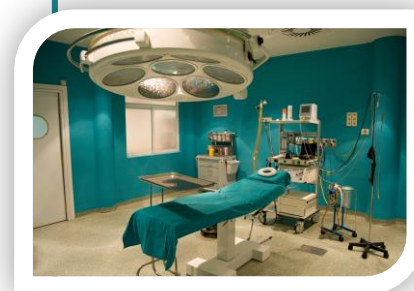
- there is a medical reason that you need to have a C-section.
- you and your baby are at a low risk of problems during your baby's birth.

What Happens in a Gentle C-Section?

- We'll put your baby on your chest right after he or she is born. Having skin-to-skin contact—
 - helps you and your baby bond right away.
 - can make breastfeeding easier.
 - helps regulate the baby's temperature and blood sugar.
 - might make you and your family feel happier with the birth experience.
- You can choose to put music on or have dim lighting in your room.
- You can choose to watch the surgery and see your baby being born through clear drapes. You can also choose to see the baby right after birth without seeing the surgery.
- You can have an extra family member or a doula in the operating room.
- You can have fewer medical staff in the operating room.
- Your surgeons will cut the baby's umbilical cord before handing your baby to a nurse or doctor.
 - You can choose to delay when the baby's cord is cut for 60-90 seconds. Some experts think that cutting the cord later is good for your baby's health.
 - You can choose to have a support person cut the cord a second time after your surgeon puts a clamp on the cord. This cut will be closer to the baby's skin.



Skin-to-skin contact right after birth



You can dim the lights or play music in the operating room.



What Are the Risks?

- If you decide to delay when the cord is cut, you may lose some extra blood. This is usually not a major problem.
- Some people feel stress from seeing the surgery and blood through the clear drapes. If you're worried about this, talk to your provider.
- It might be harder for the provider to examine your baby while he or she is on your chest, especially if there's low lighting and the drapes are in the way.

Who Can't Have a Gentle C-Section?

It is not safe for everyone to have a gentle C-section. Some people can only have **parts** of a gentle C-section. You cannot have **all parts** of a gentle C-section if—

- your baby is born earlier than 39 weeks
- your providers have concerns about your baby's health.
- your providers have concerns about your health.
- you need to be put under general anesthesia (put to sleep all the way) during the C-section.

Although you may plan to have a gentle C-section before your baby's birth, we cannot know for sure if you'll be able to have one until it's time for the baby to be born. Your providers may have to do a regular C-section or only some parts of a gentle C-section if they have concerns about you or your baby.



Talk to your provider to see if a gentle C-Section is safe for you and your baby.



Your Preferences For A Gentle C-Section

Put a check next to your preferences for a gentle C-section. We will try to honor these preferences as long as it is safe for you and your baby. For more information, see the descriptions on the first page of this handout.

- If the baby is healthy, I'd like to hold my baby skin-to-skin after the cord is clamped. (The nurse will bring the baby around the drape and help you hold the baby on your chest.)
- I would like music in the operating room.
- I would like dim lighting in the operating room.
- I would like to see the baby come out of the cut in my skin (clear drapes). It's okay that I will see blood and fluid.
- I want to see the baby right after he or she comes out (drop the drapes). It's okay that I will see blood and fluid.
- I would like a doula or an extra family member in the operating room. (Staff can ask your family and support people to leave with short notice if there is an emergency.)
- As long as it is safe and appropriate, I would like as few staff as possible in the room. This means that there will be fewer non-essential staff in the operating room.
- I would like the doctors to wait 60-90 seconds before cutting the cord if the baby is healthy. The drapes will be dropped so I can see the baby's cord being cut.
- I would like my support person to cut the cord a second time after my surgeon cuts it.

I understand that the plan for my surgery may change at any time if my medical team is concerned about my health, the health of my baby, or the safety of other patients.

I understand that the plans I checked above may change at any time before, during, or after my baby is born. I have had my questions answered.

By signing, I give my permission for the preferences I marked above.

_____	_____	_____
Patient Name (print)	Patient Signature	Date
_____	_____	_____
Provider Name (print)	Provider Signature	Date
_____	_____	_____
Witness Name (print)	Witness Signature	Date



For the Provider:

- Scheduled repeat cesarean at 39 0/7 to 40 6/7 weeks
- Scheduled primary cesarean for malpresentation or other acceptable maternal indications at 39 0/7 to 40 6/7 weeks
- Primary cesarean during labor for failure of labor to progress in the first stage with no diagnosis of chorioamnionitis. At 39 0/7 to 40 6/7 weeks.