

What to Ask ... When Visiting a Hospital Maternity Area

Choosing where you will give birth is a big decision. We encourage you to visit potential birth settings, to talk with staff and to print and bring this list of questions—and a notebook to write down answers and thoughts. Revisiting this tool throughout pregnancy as you learn more can help ensure your maternity care stays in step with your priorities (keep in mind that you can change care arrangements during pregnancy if you choose). Visit ChildbirthConnection.org/HealthyPregnancy for more information about many of the topics mentioned below.

Services and Practices

- **Is there a birth center in the hospital? If so, how does care in the birth center differ from “regular” hospital maternity care?**
- **Would I labor and give birth in one room, or would I need to move right before my baby is born?**
- **Would I stay in the same room for the rest of the stay after giving birth?**

Companions During Labor and Birth

- **Do you have any policies that limit the number of people who may be with me during labor and birth? Can the baby’s siblings be present? Is there an age restriction?**
- **Do you have experience with trained labor support (doulas) during labor and birth? Do you encourage the use of doula care? Does the hospital offer its own doula program?**

Did You Know? Doula care offers a lot of benefits and has no known risks.

Care Around the Time of Birth

- **How do you feel about elective induction (when there is no health problem)?**

Did You Know? Some maternity care providers are becoming interested in offering elective induction at 39 weeks. However, induced labor can be longer, more painful and costlier to hospitals. Also, negative impacts on breastfeeding, mother-baby attachment and maternal mental health are plausible and haven't been well studied.

- **When do you recommend that women go to the hospital during labor?**

Did You Know? Working by phone with a nurse to wait until the stronger, closer contractions of "active labor" can help you avoid an unneeded cesarean and other interventions.

- **How do you monitor the well-being of the baby during labor? Do you use occasional or continuous electronic fetal monitoring? Is a doppler (hand-held ultrasound device to monitor the baby's heart) or fetoscope (stethoscope for listening to the baby's heart) an option?**

Did You Know? Dopplers and fetoscopes are safe and effective options and enable you to move around during labor. Unlike continuous fetal monitoring, they do not increase your likelihood of having a cesarean section.

- **What are your usual policies and practices about:**

IVs (intravenous lines) during labor?

Did You Know? The best available research has found that IVs are not appropriate as a routine practice. The end of an IV can be inserted and taped to your arm just in case IV fluids need to be attached later.

Being active and moving about in labor?

Did You Know? The best available research supports your freedom to be up and about during labor, which reduces your likelihood of having a cesarean birth.

Eating and drinking in labor?

Did You Know? The best available research supports drinking when thirsty and, if you want, eating lightly.

Positions for birth?

Did You Know? The best available research supports avoiding lying on your back when you are pushing your baby out and encourages women to choose other positions, according to their preferences.

- **What is your usual approach if labor is progressing slowly?**

Did You Know? It's common to give synthetic oxytocin ("Pitocin," a "high-alert" medicine due to its powerful effects) through an IV line. Skillful doctors and nurses will know drug-free ways to promote labor progress. Many less invasive things can be done before deciding on a cesarean.

- **What percentage of the time do women giving birth here get an episiotomy (a cut to enlarge the opening of the vagina just before birth)?**

Did You Know? The best available research finds no benefit and some risks to the routine or liberal use of episiotomy.

Coping with Labor Pain

- **How would you recommend that I prepare for managing pain during labor and birth?**

Did You Know? There are a lot of ways to relieve and cope with labor pain, with varying risks and benefits, so it's important to know your options and learn about their pros and cons in advance.

- **What drug-free measures for pain relief are available in this hospital?**

Did You Know? Drug-free methods and techniques (such as tubs, showers and birth balls) can help women cope with labor and have limited or no side effects.

- **What if I decide I want an epidural?**

Did You Know? Epidurals can provide good pain relief but often change the course of labor in other ways that can have risks and downsides.

- **Are other pain medications an option?**

Did You Know? Nitrous oxide can provide helpful pain relief with fewer unintended side effects than epidurals or opioids (narcotics).

Complications

- **What percentage of women who give birth here have a cesarean section?**

- **Are there any situations (such as a cesarean or other tests or treatments) that would require me to be separated from my partner/spouse and/or doula during labor or birth?**

Postpartum and Newborn Care

- **Does this hospital have policies about early skin-to-skin contact after vaginal birth? After cesarean birth?**

Did You Know? Being in skin-to-skin contact right after the birth (during and beyond the “golden hour”) has important benefits for you and your baby as you both adjust to major changes, get breastfeeding under way and start to build your relationship.

- **What newborn care is routinely provided or offered if a baby is healthy?**
- **Are there any reasons my baby would need to be separated from me immediately or shortly after birth? For what purpose and for how long?**
- **Are there any policies regarding the use of hospital nursery care by healthy newborns? For example, do you have a “rooming in” policy where my baby stays in the room with me instead of going to the nursery?**
- **Is there a newborn intensive care unit on site?**
- **Is there any situation in which my baby would need to be transferred to another facility?**
- **What breastfeeding resources are available? Is it a “baby friendly” hospital with lots of support for breastfeeding moms?**
- **Does the hospital have a lactation consultant on staff?**
- **How would I ensure that my baby is not given bottles of water or formula?**
- **Could my partner/spouse stay with me throughout my stay after the baby is born? What accommodations are available?**
- **How long do women usually stay in the hospital after vaginal birth? What about after a cesarean birth?**

- **Are shorter or longer stays acceptable to the hospital?**
- **What follow-up care and support would you provide after I go home?**
- **Does the hospital have a nurse available for home visits?**
- **Do you provide information or give breastfeeding or emotional support over the telephone?**

Cost

- **Do you accept *[name of my insurance plan]*?**

Did You Know? If you don't have health insurance, you can visit [HealthCare.gov](https://www.healthcare.gov). Because you are pregnant, you qualify for a special enrollment period and may be able to sign up for insurance now, or you may qualify for Medicaid. Also keep in mind that you should call your insurance company to make sure your preferred hospital is covered by your plan; the list of participating hospitals can change over time.

- **Are there any possible extra costs that I should know about now?**
- **Would I (or my insurance company) have to pay for services I do not use (for example, an anesthesiologist)?**

Childbirth Connection, a program of the National Partnership for Women & Families, works to improve the quality, outcomes and value of maternity care in the United States. Learn more at www.ChildbirthConnection.org and www.NationalPartnership.org.

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