



QUESTIONS TO ASK YOUR MIDWIFE OR OB



Have you ever noticed that many pregnant people spend more time choosing their stroller than their midwife or OBGYN? When you're expecting, choosing your medical care-provider is one of the most important decisions you can make! Your midwife or doctor will shape how you think about your body your baby, and determine much of your labor, delivery, and postpartum experience.

There's a huge misconception that all midwives or physicians practice the same way. There's also a huge misconception that all you need to have "a healthy baby" is "a good doctor." Birth is complex, and especially in today's world, it's important to do some research before committing to your long-time GYN or a taking a recommendation from a colleague.

"It is important to remember that people have goals other than simply emerging from childbirth unscathed. Safety during labor is the floor of what people deserve. What we should all really be aiming for is the ceiling: care that is not just safe, but also supportive and empowering."

- DR. NEEL SHAH, M.D



WHAT TO ASK AN OB OR MIDWIFE

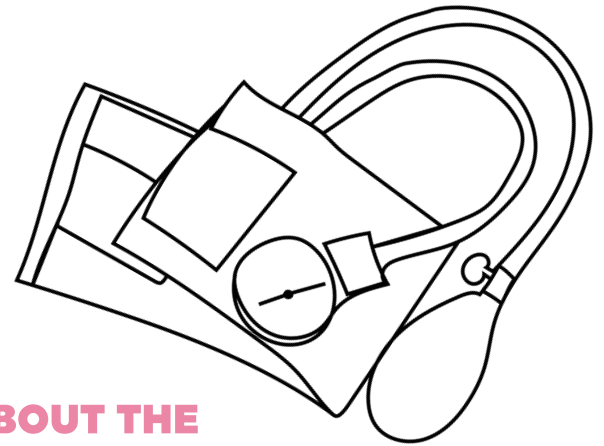
ASK ABOUT THEIR PRACTICE:

How many of you are in the practice and who will be with me when I deliver?

How long are your prenatal visits?

How much guidance and education will you offer me throughout my pregnancy and postpartum? What other resources do you recommend I look into?

Do you recommend that I hire a doula? Why? Why not?



ASK ABOUT THE BIRTH LOCATION:

What non-medical forms of pain management are used frequently?

Is nitrous oxide available?

Is there an additional fee for my partner to stay with me in a private room overnight?

How prevalent are medical students?

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ASK ABOUT THEIR APPROACH TO BIRTH & POSTPARTUM CARE:

How often do you recommend I receive an ultrasound during pregnancy? Why?

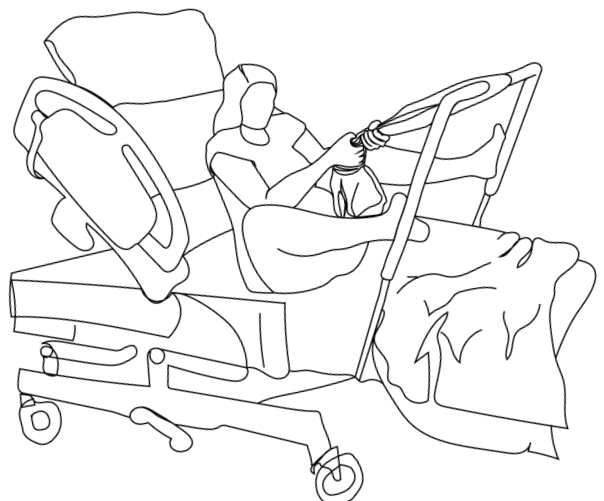
What percentage of your clients deliver without epidural medication?

What percentage of your clients push lying on their side or on hands and knees? How do you typically support clients during the pushing phase?

What percentage of your clients deliver via cesarean, and what is the most common reason?

Under what circumstances will you suggest induction of labor? Do you suggest this routinely even if the baby is showing no signs of a problem at 40 weeks? 41 weeks? 42 weeks?

What can I expect from you in the days and weeks following labor? Do you have recommendations for breastfeeding support, pelvic floor physical therapy, postnatal depression and anxiety?



HOW TO GET THE MOST OUT OF YOUR INTERVIEW

It can be surprisingly tricky to ask questions and get complete answers from medical providers. With implicit power dynamics at play even really well-spoken and confident individuals have been known to lose their words and walk away from appointments feeling confused.

In order to get the most out of your interview:

ASK BETTER QUESTIONS

Ask questions that start with “what,” “how,” or “under what condition” as opposed to “yes” or “no” questions. Once your provider answers, summarize their answer and repeat it back. This will help make sure you’re understanding each other and give you time to see if you have follow up questions.

ARRIVE PREPARED

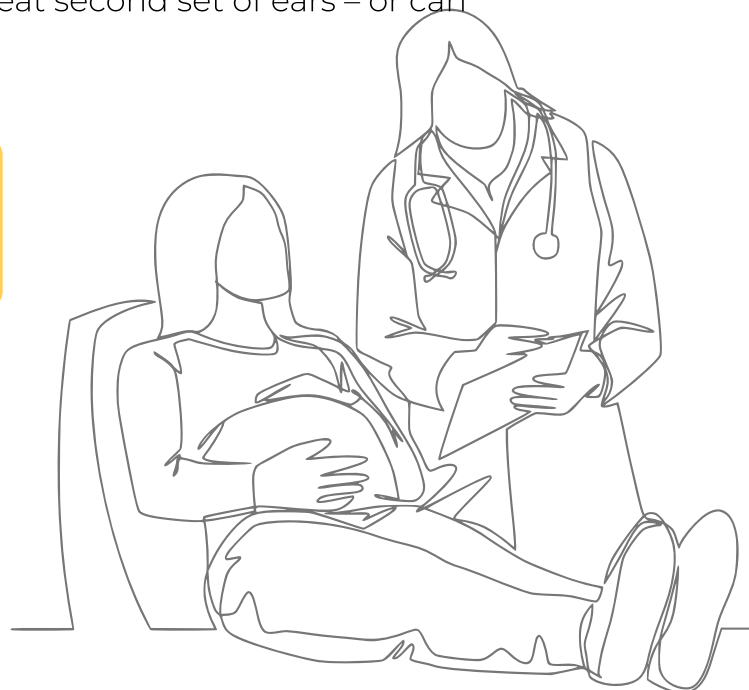
Write down your questions (or use ours) ahead of time and have a place to take notes when they answer.

BRING A BUDDY

A partner, family, friend, or doula can be a great second set of ears – or can even help ask important questions.

WHAT IF I DON'T LIKE THE ANSWERS TO MY QUESTIONS?!

Find someone else! While it might be easiest to switch to a new provider before week 28, most low-risk pregnant people can change their midwife or OB until week 36. You only have one chance to have this baby and your team really matters!



NOTES

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