Please continue onto page 3

## and P stpartuit

Vith the expectation of a healthy outcome	baby(ies) already in place, my goals for this birth are:

escribed as a let us know if you have essentially as a let us know if you have essentially and what we can do to accommodate these needs.

Ple se describe ar about labor and birth, or other information that will help us provide the best possible care to meet your individual peeds

I have a provided a provided and birth preferences with my provider during prenatal care visits. I recognize that my preferences and wishes may recognize that my preferences and wishes a provided and may need to change if medical needs arise in order to ensure a safe and healthy birth for my baby and me.

## PLANTO GU