

# ቅጥራ ናይ ምርጫታት ወሊድ

## Birth Preferences Form (Tigrigna)

We use this sheet to understand your preferences for labor and delivery. Review it with your provider and bring it to your birth to share with your nurse and care team. Remember that no one knows how your labor will unfold, so we encourage you to give yourself flexibility to change your mind. Please see the Birth Preference User's Guide for more information.

ዛገ ወረቆት ኣብ ግዜ ሕጻን ሕርሲን ወሊድን ዘለኪ ምርጫታት ንምርዳእ ንጥቀመሉ። ምስ ናትኪ ወሃቢ ኣገልግሎት ጥዕና ደጊምኪ ርእይዮ። ከምኡ-ውን ኣብ እዋን ሕርሲ ምስ ነርስክን ዝከናዕኩኹ ፕጅላ ንክተርእይዮ ኣምጽእዮ። ናይ ሕርሲኹ ጉዳይ ከመይ ከም ዝኸውን ዝፈልጥ ወልሓድ ሰብ ከምዘየለ ዘኸረ፡ ስለዚ ንክብስኹ ከም ዝጥዕመምኹ ምእንቲ ክትተግጸጸፊ ኣባባትኪ ንኸትቅይሪ ነተባብዓኪ። ንዘይዳ ሓበሬታ ነቲ Birth Preference User's Guide (ናይ ወሊድ ምርጫታት ናይ ተጠቓሚ መምርሒ) ብኸብረትኩም ርእይዮ።

Name/ ስም፡ \_\_\_\_\_ Date of birth/ ዕለተ ልደት፡ \_\_\_\_\_

Partner name, if applicable/ ስም መጻምዲ፡ ኣሎ እንተ-ኾይኑ፡ \_\_\_\_\_ About me/us/ ብዛዕባይ/ብዛዕባና፡ \_\_\_\_\_

Labor support team (names and relationships)/ ናይ ሕርሲ ሓገዞቲ ጉጅላ (ኣሰማትን ዝምድናታትን)፡ \_\_\_\_\_

Hopes for this birth/ ነዚ ሕርሲ ዘሎ ተስፋታት፡ \_\_\_\_\_

Concerns about this birth/ ብዛዕባ እዚ ሕርሲ ዘለዉ ስክፍታታት፡ \_\_\_\_\_

### Pain management/ ምቁጽጻር ቃንዛ

- I plan an epidural     I desire an unmedicated birth    I am open to:     an epidural     IV pain medication
- መድንዘዚ ትሕተ ሽምጢ ከግበረለይ ይምድብ     መድሃኒት ዘይውሰደሉ ሕርሲ ይደሊ    ነዚ ዝስዕብ ኣማራጺታት ክፍትቲ እየ፡     መድንዘዚ ትሕተ ሽምጢ
- IV (ውሽጠ ቪይናዊ) መድሃኒት ቃንዛ
- I would like to use the following comfort techniques/ ነዘም ዝስዕቡ ናይ ጣዕሚ ቴክኖካት ክጥቀመሎም ይደሊ፡
  - Birth ball     Music/Quiet     Different positions     Visualization
  - ኩዕሶ ሕርሲ    ሙዚቃ/ህዳኢ    ዝተፈለለዩ ኣንፈታት    ኣብ ኣእምሮ ምቕራጽ
  - Massage     Aromatherapy     Tub/Shower     Breathing techniques
  - ምድራዝ ኣካላት     ኣሮማቴራቲ (ብዘይትን ጥዑም ጨና ዘለዎ ኣትክልትን ምድራዝ ኣካላት)     ባስካ/መሕጺብ ኣካላት     ናይ ምስትንጉሳ ተክኒካት

If applicable/ ኣድላዩ ምስ ዝኸውን፡

Penny Simkin pain management preference # \_\_\_\_\_ or code word to request medication: \_\_\_\_\_  
 Penny Simkin (ፔን ሲምኪን) ናይ ቃንዛ መቆጻጸሪ ምርጫ# \_\_\_\_\_ ወይ ናይ ቃል ኮድ ንምሕታት መድሃኒት፡ \_\_\_\_\_

### Labor and birth/ ሕጻን ሕርሲን ሕርሲን

Monitoring of my baby:     Intermittent, if appropriate for my situation     Continuous     Mobile

ምክትታል ህጻንይ፡    ኣብ ናተይ ኩነታት ኣድላዩ ምስ ዝኸውን፡ ጸጸኒሑ ዚኸሰት    ቀጻሊ    ተንቀሳቓሲ

Medication access point (Hep-Lock) rather than being connected to the IV, unless necessary

ኣድላዩ ኣንተድኣ ዘይኮይኑ፡ ካብ ምስ IV ምልጋብ ናይ ሕክምና መርኪቢ ነጥቢ (Hep-Lock)

I would like to try different positions for pushing: \_\_\_\_\_

ንምድፋኡ ዝሕግዘኒ ዝተፈለለዩ ኣንፈታት ክፍትን ይደሊ፡ \_\_\_\_\_

I would like a mirror to see my baby's head/I ናይ ውላደይ ርእሲ ምእንቲ ክርእ፡ መስትያት ምደለኹ

I would like to touch the baby's head as it emerges/ናይቲ ህጻን ርእሲ ከወጽእ እንከሎ፡ ከሕዞ ምደለኹ

If a cesarean birth is necessary, I would like \_\_\_\_\_ to accompany me in the operating room.

ኣንተድኣ መጥባሕታዊ ሕርሲ ኣድላዩ ኹይኑ፡ ኣብቲ ናይ መጥባሕቲ ክፍሊ \_\_\_\_\_ ከሰንዮን ምደለኹ።

If the baby has to go to the NICU, I would like \_\_\_\_\_ to accompany the baby.

እቲ ቆልዓ ናብ NICU ክኸይድ እንተድኣ ኮይኑ፡ \_\_\_\_\_ ነቲ ቆልዓ ከሰንዮን ምደለኹ።

**After your baby is born/ ህጻንኪ ድሕሪ ምውላዩ።**

I plan to breastfeed. Concerns about feeding/ አነ ከጥብቆ መደብ አለኒ። ብዛዕባ አመጋግባ ስክፍታታት አሉ። \_\_\_\_\_

Questions about routine:  Vitamin K  Eye ointment  Hepatitis B vaccine  Postpartum Pitocin  
ሕዮታት ብዛዕባ ዝዝውተሩ ነገራት፡ ሺታሚን ኪይ ናይ ዓይን ቅብኢ ከታብት ወይቦ ቢ ፒቶሲን ድሕረ ሕርሲ

If my baby is a boy, I plan to have him circumcised/ ውላደይ ወዲ እንተድኣ ኮይኑ፡ ከኸንሸቦ ይምድብ።

My partner or I would like to bathe the baby.  Yes  No  
አነ ወይ መጻምደይ ነቲ ህጻን ከንሓጽቦ ምደለና። እወ ኣይፋል

**Cord blood/ ናይ ዕትብቲ ደም**

Delay cord clamping  Donation  Banking  \_\_\_\_\_ cuts the cord  
ምድንጓይ ምቁጻር ዕትብቲ ወፊያ ናይ ባንክ አገልግሎት \_\_\_\_\_ ነቲ ዕትብቲ ከቆርጾ እዩ

**My baby's pediatric provider is/ ናይ ውላደይ ሓኪም ቆልዑ እዚ እዩ።**

Name: \_\_\_\_\_ Clinic: \_\_\_\_\_ Phone: \_\_\_\_\_  
ስም፡ \_\_\_\_\_ ክሊኒክ፡ \_\_\_\_\_ ተሌፎን፡ \_\_\_\_\_

Birth preferences reviewed by doctor or midwife: \_\_\_\_\_ Date: \_\_\_\_\_  
ናይ ወሊድ አማራጺታት ብሓኪም ወይ ብአሕራሲት ዝተረ-እየሉ፡ \_\_\_\_\_ ዕለት፡ \_\_\_\_\_

We do not discriminate on the basis of race, color, national origin, sex, age or disability in their health programs and activities.

እብ ፕሮግራማትን ንጥፊታትን ጥዕና ብመሰረት ዘርእ፡ ሕብረ ቆርባኑ፡ ሃራዊ መብቆል፡ ጾታ፡ ዕድሜ ወይ ድማ ስንክልና ኣድልዎ ኣይንገብርን እና።

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 858-311-9127 (Swedish Edmonds 858-311-9178) (TTY: 711).

注意：如果您講中文，我們可以給您提供免費中文翻譯服務，請致電 888-311-9127 (Swedish Edmonds 888-311-9178) (TTY: 711)