



Emergency Backup Plan for Home Births
This paper will be essential in the event of an emergency
PRINT this and fill it out completely and
place it on your refrigerator

The following information is important for the ambulance company to know, should one be necessary. If a friend, child, father, or any assistant should make the phone call, this form can save time and inconvenience. This task is usually not done by the midwife, unless no one else is available to call, since she will undoubtedly be busy taking care of mother and/or baby. After placing the call it is a good idea for someone to go outside to watch for the ambulance. It is also helpful for someone to clear a path, if needed, through the house to the room where the mother is.

Instructions for calling an ambulance to a home birth:

- Call 911 (or _____ - _____ if not in 911 area)
- Take a deep breath and stay calm. Speak slowly so you will be understood.
- "We are at a planned home birth, with a **licensed midwife** in attendance. We have the following situation....." (midwife will tell you what to say).
- "The address is _____."
- Directions to our home: _____

- "The name of the mother is _____, she is _____ years old and her due date is _____."
- The name of the father is _____.
- A contact number for someone at the home is _____ - _____.
- Answer any other questions as best as you can or ask someone who may know.

If you have pre-registered at a hospital or have a backup doctor, please fill in this information:

Obstetrician Name: _____ Phone: _____

Hospital Name and Address: _____

Emergency Room Phone: _____ Labor and Delivery Phone: _____

Pediatrician Name: _____ Phone: _____

If you do not live in an area serviced by EMS-911:

You will need to find out who provides ambulance service in your area. You can ask your local police or sheriff's office. Call the business (non-emergency) number and ask the following questions at least **4 weeks prior to your due date:**

What number should I call if I have an emergency? _____

How much do they charge? _____

Do they require payment at the time of transport or will they bill you? _____

Will they accept a check, insurance card, or cash only? _____

Does my family need a membership to use the service? _____

How long will it take them to arrive at my address? _____

Are they equipped to set up an IV? _____

Are they equipped with a NICU? _____

