

Emergency Back Up Plan

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Phone #: \_\_\_\_\_ Cell # \_\_\_\_\_

Is a Paramedic Available Through Local 911 Service?     YES     NO

In case of an emergency situation we plan to transport to: \_\_\_\_\_

Labor and Delivery Unit Phone # of chosen hospital: \_\_\_\_\_

Directions from your home to the hospital: (please write them for a stranger)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

If you plan for your children to be present at your labor and birthing who will stay with them in the event of an emergency transport? \_\_\_\_\_

We have read and understand that South Georgia Birth Services does not have hospital privileges, that in the event of a transport it would also always be a transfer of care. We acknowledge that it is up to us to secure a back up physician if we feel it is needed or to accept whoever is on call. We understand that the Midwives work within the parameters of a standard of practice document which states that if emergency complications arise that cannot be resolved at home they will initiate transport proceedings.

\_\_\_\_\_  
Mother's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father's signature

\_\_\_\_\_  
Date

Thank you for your time & effort. We share your desire for a safe & healthy birth at home.