Memo

Follow instructions, which are underlined to identify them. When you are done, delete the instructions.
Edit the yellow highlighted, italicized text, then remove the highlighting and change the font to not italicized

To: *names of your audience members or description of their role(s)*

From: *your name your initials* in a script font to simulate your handwriting

CC:

Date: *October 12, 2014*

Re: Recommendation Report About *Birthing Outside of a Traditional Hospital Setting*

To update the table of contents headings and page numbers, refer to TOC How To0.doc or your word processor's help file.

[*Introduction 1*](#_Toc408219427)

[*Background 1*](#_Toc408219428)

[*Criteria 2*](#_Toc408219429)

[*Safety 2*](#_Toc408219430)

[*Experience 2*](#_Toc408219431)

[*Cost 2*](#_Toc408219432)

[*Possible Solutions 2*](#_Toc408219433)

[*Birth at home 3*](#_Toc408219434)

[*Birth in a birthing center 3*](#_Toc408219435)

[*Birth in a hospital 4*](#_Toc408219436)

[*Conclusions and Recommendations 5*](#_Toc408219437)

[*References 5*](#_Toc408219438)

# Introduction

The purpose of this recommendation report is to recommend *the best place for my wife to birth our fourth and final child*. The audience for this report *is our parents and siblings, all who would like to be present at the birth and care greatly about the outcome*. Based on my research, I recommend *that my wife give birth in a birthing center.*

# Background

Include history, significance, size and trends of the issue you are addressing.

*According to Jackson, since 1990 in the United States, birthing outside of hospitals has increased 328%, to 107,311 births in 2013. Jackson identifies the main contributing factors as safety, the quality of the birthing experience, and cost.*

*My wife is pregnant with our fourth child, due in March of 2015, and we, as a family, are attempting to determine the best place for her to give birth. With our second son, her hospital experience was less than ideal. Her epidural failed, she had to give birth on her back despite strong urges to roll over, and the nurse and doctor repeatedly attempted to give her intravenous pain relief, which was highly undesired. The birth of our third son went smoothly in a hospital setting, but it left us curious as to alternative methods of birthing, and the specific advantages and disadvantages of those alternatives.*

*Because pregnancy is a finite event, and hospital registration is recommended to take place several months prior to the actual birth, time is short for deciding where my wife will birth. The options include home birth, birthing center, or hospital.*

# Criteria

Study the file named The Role and Importance of Criteria in the Evaluation of the Possible Solutions.docx. List, briefly describe, and identify the significance of your criteria.

I have identified through research and reflection the following criteria, which I believe the decision makers are likely to use to evaluate possible solutions: List, briefly describe, and identify the significance of your criteria. Labels for criteria should be descriptive, precise, and concise

* *Safety*
* *Experience*
* *Cost*

## *Safety*

*Safety is of the utmost importance when making any medical decision. Birth, though it often occurs naturally and does not necessarily require medical intervention, can carry great complications for mother and child. History shows that birth, for both mother and child, can even be deadly.*

*Because complications can and do occur, the safety of the setting in which one gives birth has to be of primary consideration.*

## *Experience*

*The birth of a child, for both the immediate and extended family, is one of the most beautiful and special moments in life. My wife has expressed great interest in having a different experience on this, her fourth and final time giving birth. She would like the opportunity to move around during labor, avoid unnecessary interventions to speed up the process, and the possibility of giving birth in either a birthing chair, or a birthing pool. These options are unlikely to be given in a traditional hospital setting, and therefore have us considering home birth, or birthing at a birthing center.*

## *Cost*

*In an ideal world, cost would not be a consideration. Though we are sound financially, cost is still a factor in every decision we make. Though it will not directly determine which choice we make, it will be used as a means of ascertaining the whole picture of what each option entails.*

*We have insurance coverage which will certainly cover a portion of the traditional hospital birth. It will also cover a portion of the birthing center option; however, it will not cover home birth.*

# Possible Solutions

List, briefly describe, and analyze how well each possible solution satisfies each criterion. Use the heading levels to help make it clear to the audience what you are doing.

Through thorough research I identified the following as possible solutions: labels for possible solutions should be descriptive, precise, and concise

* *Birth at home*
* *Birth in a birthing center*
* *Birth in a traditional hospital*

## *Birth at home*

*Safety*

*Home births are not as common in the U.S. as they are in other industrialized nations. However, studies from numerous other industrialized nations show that home birth can be just as safe as hospital birth in the case of low-risk pregnancies.*

* *Research from the Netherlands - which has a high rate of home births - found no difference in death rates of either mothers or babies in 530,000 births (BBC).*
* *Research from British Columbia found that: Planned home birth attended by a registered midwife was associated with very low and comparable rates of perinatal death and reduced rates of obstetric interventions and other adverse perinatal outcomes compared with planned hospital birth attended by a midwife or physician (Janssen 377).*
* *Research in the United States has also confirmed: “Planned home birth for low risk women in North America using certified professional midwives was associated with lower rates of medical intervention but similar intrapartum and neonatal mortality to that of low risk hospital births in the United States” (Johnson).*

*Experience*

*While “experience” is not something easily quantifiable, it is nonetheless an important part of giving birth. Because my wife is certain that this shall be our last child, she wants to have an experience unlike those she has already had. Because each of her births has taken place in the hospital, complete with anesthesia and other medical interventions, this would certainly be a different and unique experience.*

*Cost*

*Home birth is significantly cheaper than hospital and birthing center birth. “Home birth may be significantly easier on your pocket book. An average uncomplicated vaginal birth costs about 60% less in a home than in a hospital” (American Pregnancy Association).*

*However, our insurance does not cover home birth, which means we would be liable for all costs out-of-pocket.*

## *Birth in a birthing center*

*Safety*

*Birthing centers are just as safe as hospitals, according to research.*

* *For low-risk women, hospital birth, and birthing in a birthing center “result in safe outcomes for mothers and babies. However, fewer operative deliveries and medical resources were used in collaborative care” (Jackson).*
* *The quality of care in birth centers reported in the "The National Birth Center Study" reflects the low overall intrapartum and neonatal mortality rate of 1..3/1000 births; 0.7/1000 if lethal anomalies are excluded. These rates are comparable to studies of low risk, in-hospital births (American Association of Birth Centers).*
* *The cesarean section rate for women receiving care in birth centers averages 4.4%, approximately one half that in studies of low risk, in-hospital births (American Association of Birth Centers).*

*Experience*

*Again, “experience” is hard to quantify, but the birthing center can be seen as middle ground between a hospital and a home setting. Because medical interventions are discouraged, and the birthing mother is free to move around at will in a bedroom-like setting, the birthing center offers a distinctly different experience from that of the hospital. Alternative pain relief methods are encouraged, and the majority of babies are delivered vaginally with little to no medical intervention.*

*Cost*

* *Birth centers nationally have consistently displayed charges for care for normal birth that average up to 50% less than regular hospital stays and 30% less than short stays - including practitioner fees (American Association of Birth Centers).*
* *“By providing "high touch" rather than "high tech" care, birth centers minimize the overuse of technology,” thus reducing costs (American Association of Birth Centers).*
* *Our insurance provider does contract with several local birthing centers on an 80/20 payment schedule. Our insurance pays 80% of the overall costs, and we cover the remaining 20%.*

## *Birth in a hospital*

*Safety*

*As stated above, the safety of birthing in a hospital is about the same as birthing at home or in a birthing center in the case of a low risk pregnancy. In the event of complications however, the hospital is considered the only safe place to birth.*

*Experience*

*My wife has given birth in a hospital three times previously and her experiences have varied. However, several occurrences made her consider an alternate place of birth. These include:*

* *Lying on her back while laboring despite having a strong urge to roll over.*
* *A failed epidural which did not help with pain management, but did make her blood pressure drop to a dangerously low level.*
* *Having a fetal monitor, catheter, internal contraction monitor, IV, and epidural all hooked onto her at the same time contributing to her inability to move about while laboring.*
* *Birthing flat on her back rather than in the squatting position she would have preferred.*

*Based on these, and several other instances, for my wife, the hospital experience is not the ideal when giving birth.*

*Cost*

*Hospital birth is the costliest of the three options being considered. Last year, my wife gave birth to our son Max in the local hospital covered by our insurance, and the total bill came to around $18,000. This included:*

* *Two day stay for mother in baby in hospital*
* *Anesthesia*
* *Circumcision*
* *Post-birth care*
* *Midwife fees for birth, but excluding those for prenatal care prior to the birth*

*Our insurance covered 80% of the hospital bill and we covered the other 20%.*

# Conclusions and Recommendations

The following chart summarizes my findings.

*I rated each category on a scale of 0-5, with 5 being excellent and 0 being very poor. Safety at each location for a low-risk birth is about the same, but higher risk births are safer in a hospital, thus the same ratings. Paying 20% of a hospital birth comes out to be about the same as paying for a home birth out-of-pocket with our midwife. Paying 20% of a birthing center bill is far less. Experience of birthing at home or in a birthing center were rated nearly the same. The birthing center will have some advantages over home because the center is designed and equipped for birthing, while the typical home is not.*

Based on my findings, I recommend *that my wife give birth in a birthing center, in order to have the safe, affordable, natural experience she craves*.

# References

*“Birth Centers Fact Sheet.” Birthcenters.org. American Association of Birth Centers, n. d.*

*Web. 20 Oct 2011.*

*“Home Birth.” americanpregnancy.org. American Pregnancy Association, n.d. Web.*

*19 Oct. 2011.*

*“Home Births as Safe as Hospital.” BBC News 15 April 2009. Web. 18 Oct 2011.*

*Jackson, Debra J. “Outcomes, Safety, and Resource Utilization in a Collaborative Care Birth*

*Center Program Compared With Traditional Physician-Based Perinatal Care.”*

*American Journal of Public Health 93.6 (2003): n. page. Web. 17 Oct. 2011.*

*Janssen, Patricia A. “Outcomes of Planned Home Birth with Registered Midwife versus Planned*

*Hospital Birth with Midwife or Physician.” CMAJ 181.6 (2009): 377. Web. 18 Oct. 2011.*

*Johnson, Kenneth C. “Outcomes of Planned Home Births With Certified Professional*

*Midwives: Large Prospective Study in North America.” BMJ 330 (2005). n. page.*

*Web. 18 Oct 2011.*