

Circle of support

Sentara Martha Jefferson
supports mothers in
realizing their ideal birth plans



Like all expectant mothers, **Amy Plopper** ultimately just wanted to have another healthy baby her second time around. Having gone through a difficult experience with her firstborn, though, she was also hoping her new baby would arrive with as little medical intervention as possible—and she was well aware that things didn't always go as planned.



Before she even went into true labor with her first child, her doctor discovered a potentially serious problem with the placement of the placenta. To protect the baby, Plopper underwent an emergency caesarean section, and the baby was then transferred to the neonatal intensive care unit at a nearby hospital.

“The whole experience was so traumatic,” recalls Plopper. “I had pictured being able to hold my baby immediately after she was born. Instead, she was whisked away to receive care, and we were separated for a week.”

In spite of an unexpectedly frightening start, baby Sonora, now 3, recovered. But for her second child, Amy was hoping for a different birth story—and thanks to her team of caring and competent professionals at Sentara Martha

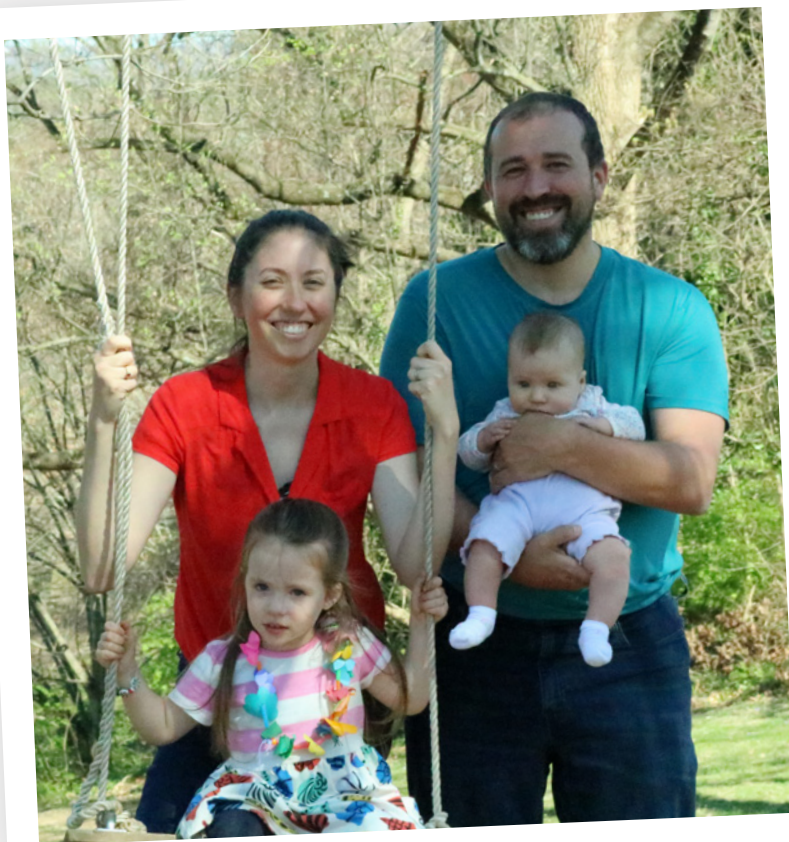


Jefferson Hospital, that story has a happy ending.

Striving for the Safest Birth Plan

Aiming to increase the odds of achieving a more positive childbirth experience, Plopper worked with a therapist to help her mentally separate the approaching pregnancy from the previous one, and she brought in a doula for additional support before, during and after childbirth.

Plopper also worked with her OB-GYN to explore the possibility of having a vaginal birth after caesarean (VBAC). While both VBACs and repeat caesareans have higher risks than first-time vaginal births, the National Institutes of Health reports that VBAC can be a safe and viable option for many women, with a reported success rate of 60-80%.





“Of utmost importance is that everyone works as a team to have a safe delivery for the mom and baby,” says Jennifer Wray, clinical manager of Sentara Martha Jefferson’s Family Birthing Center, Women’s Services and Maternity Community Education Programs. “At Sentara Martha Jefferson, we come together as a group to help provide the birth experience the mother desires.”

According to Wray, the overall caesarean rate at Sentara Martha Jefferson is about 26%, which is well below the national average and, in her words, “a testament to the team’s dedication to providing attentive, bedside support to our maternity patients.” She also attributes the low rate to the hospital’s one-to-one nurse-to-patient ratio for women in active labor and a shared commitment among labor and delivery staff and physicians to approaching birth as a natural process that is not to be rushed, rather than as a medical procedure.

Fortunately for Plopper, her OB-GYN confirmed that she would be an excellent candidate for VBAC.

“I wanted to know what childbirth felt like—even the labor pains,” explains Plopper. “So we decided to move forward with the plan, in hopes of having that skin-to-skin moment after our baby was born.”

Leaning on Her Circle of Support

When the big day finally came, circumstances were already different. Plopper’s second



baby was arriving past the due date, whereas Sonora had been delivered three weeks early.

Wanting minimal medical intervention, Plopper relied on the birthing center’s whirlpool tub and yoga ball for pain relief while labor progressed. The hospital’s labor and delivery team regularly monitored her and her baby for any signs of distress. At certain points, when Plopper would become emotional or exhausted, her doula would bring her focus back to the “circle of support” that was present in the room.

“So often it helps to remind a mother that all the feelings she is having are a normal part



Murray, MSN, RN, who was working in the labor and delivery room that day. “Together, everyone created a collaborative and respectful environment. It couldn’t have gone any better.”

All’s Well That Ends Well

Plopper’s labor and delivery story represents the type of experience Wray wishes for every mother-to-be at Sentara Martha Jefferson. She is quick to note, however, that this supportive environment doesn’t end

of labor,” says Shannon McElroy, who works independently as a doula and also as a pediatric oncology nurse at an area hospital. “I was glad to play that role for Amy, but I was just one of many in the room who were encouraging and respectful of her feelings.”

Eventually, Plopper agreed to some extra medical help to move the process along and prepare for giving birth. After that, things moved quickly.

“When it came time to push, I felt like I must be the greatest pusher in the world, based on how enthusiastically everyone cheered for me,” says Plopper.

After many hours of laboring and an hour or so of pushing, she got her long-desired moment. Weeping with happy tears, she held her baby, a daughter named Lyra, skin to skin.

“I remember welcoming Lyra with a phenomenal team in the room,” says Kathryn

with the birth of a baby, but continues into the “fourth trimester,” during which mother and child continue to go through significant changes as they adjust to life together. This approach made a big difference for Plopper as she transitioned into breastfeeding.

“Similar to the apprehension I felt prior to having Lyra was not knowing what to expect with nursing, since I had started off having to pump breast milk for my firstborn,” she says, adding that she appreciated the support she received after leaving the hospital. “We worked with a lactation consultant through our pediatrician and received follow-up support from the hospital’s childbirth education coordinator. Thanks to my wonderful team of caregivers, things have gone very well.”

Now back to work, Plopper still plans to write personal thank-you notes to every person who was present in her labor and delivery room that day. Grateful beyond measure, she appreciates the circle of support that helped her safely deliver a healthy baby—this time more aligned with the experience she had been hoping for.

“We take this journey together with the patient,” says Wray. “The mother is an informed partner, and we want her to feel heard. Amy’s birth experience was the perfect version of that.”

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