Epidural analgesia is the most popular method of controlling pain in labor in the United States today, but it has serious side effects and risks for both mothers and babies. Though most laboring American women choose epidural analgesia, it is important not to confuse a hospital's failure to provide options with patient preference. Few large obstetrical units offer LDR rooms that facilitate non-pharmacological pain relief through comfort measures, and more women would choose these methods if they were readily available. Moreover, patients who have the opportunity to choose non-pharmacological pain relief techniques report higher satisfaction with the birth experience. The architectural design of an LDR room can greatly facilitate the use of non-pharmacological techniques for effective pain relief through two primary mechanisms: relaxation through a calm, supportive physical environment, and labor in water. LDR rooms should be designed to incorporate best practices to ensure that laboring women are able to be relaxed and comfortable, that their movement is not restricted, and that their privacy is guarded. This study applies best practices to develop a model LDR room that takes into account current American codes and standards and includes features that facilitate non-pharmacological pain relief techniques.

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