

Holistic Expectations

Doula Services Form



Contact Info:

Name (First and Last): _____

Partner Name (First and Last): _____

Address: _____ City: _____ State: _____ Zip: _____

Phone #s: _____; _____

_____;

Email Addresses: _____;

Emergency contact person (can be family or friend): _____

Phone #: _____ Email Address: _____

How did you hear about our doula services? _____



Pregnancy History:

Due Date: _____ Number of Weeks at present: _____

OBGyn Name: _____ Group OBGyn is part of: _____

Hospital for Delivery (if known): _____ Is this your first pregnancy? Yes No

What if any classes have you taken so far to prepare for baby and with which organizations?

Class	Date	Organization	Evaluation of class		
_____	_____	_____	Great	OK	Poor
_____	_____	_____	Great	OK	Poor
_____	_____	_____	Great	OK	Poor

How has the pregnancy been so far? _____

What I/we would like to get out of this birth experience is _____

My/our fears or concerns about pregnancy, labor or postpartum so far are _____



Doula Services:

It has been proven through repeated studies, attending physicians, and personal testimonials (including my own!), that women who have support during labor experience faster, more effective, less stress laden births. As your doula, I will:

- provide 24/7 phone availability during pregnancy,
- schedule weekly/bimonthly get togethers to meet face-to-face, answer questions etc.
- train you in some birthing positions and massage techniques that can help with pain & progress,
- design a healthy diet plan for use during pregnancy and during breastfeeding,
- create a birth plan with you and your partner,
- provide encouragement, support and comfort during labor and birth,
- advocate for you during your hospital stay,
- make follow-up visits after your birth to check on you, your partner and the baby regarding your care and recovery, breastfeeding and answer any worries or concerns,
- be a resource for you as you start out as a parent and do my best to help you create a community of support with other mothers going through your same initiation into parenthood.

And in general, revel with you in this amazing experience!

Let me know if there is anything else I can do to support you.

Additional Questions or Concerns: _____



Please return this form via snail mail or e-mail! ☺

Holistic Expectations
1222 Nashua St.
Houston, TX 77008

OR

Contact us via phone
713-705-7257
with additional questions
or for more information!