**Doula Intake Form**

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| **Expecting Mother’s Information** |
| Name |
| Address |
| Phone |
| Email |

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| **Partner’s Information** |
| Name |
| Address |
| Phone |
| Email |

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| --- | --- | --- |
| **Providers’ Information** |  |  |
| OB and/or midwife (name and contact info) |  | Backup doula(s) (name and contact info) |

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| --- | --- | --- |
| **Basic Pregnancy Details** |  |  |
| Expected due date |  | Attended Childbirth Education (CBE)? |
| Location of birth |  | What type of CBE class(es)? |
| Names and ages of siblings (if applicable) |  | CBE instructor’s name / location |
| Baby’s sex and/or name of baby (if known) |  | How long and effective was the class(es)? |
| Number of total pregnancies |  | Have you thought about a birth plan? |

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| **Labor and Birth Details** | | |
| How has this pregnancy been so far? | | |
| Your experience during previous pregnancies (if applicable) | | |
| Specific concerns and needs for labor and birth | | |
| Specific needs of the mother | | |
| Specific needs of the partner | | |
| Preferred coping/relaxation techniques | | |
| Words, touch, scents to be avoided | | |
| Photograph and/or video planned? | Newborn plan completed? | Postpartum plan completed? |
| Special requests for the doula | | |
| Special items to bring to labor | | |
| Names of other family members/friends who may be at birth  Do you have specific comments about anyone else attending the birth? | | |