



CelebratedBIRTH

Client Questionnaire

Name:

Address:

Phone Number:

Partner's Name:

Address, if different:

Phone Number:

Due Date and calculation: LMP? Ovulation Date?:

Care Provider:

Office Address:

Office Phone:

Birth Location:

Sex of Baby, if known:

Pets? If so; names?

Ideal Birth

Can you describe your ideal birth- aside from a pain-free, quick birth?

Can you think of three important points you desire to get out of your birth?

Is there anything you feel your labor or birth would not be complete without?

What does the atmosphere look like in your ideal birth, i.e. music, scents, lights?

Who do you see around you?

Healthcare

Please describe your pregnancy thus far:

Pre-pregnancy Weight:

Your Date of Birth:

Previous number of...

Births:
Pregnancies:
Miscarriages:

Cesareans:
VBACs:

Other Healthcare Providers You See (Chiropractor, Acupuncture, Homeopathy, Naturopathy, Therapist, etc.):

Are you allergic to any medicines?

What medicines (include OTC) are you currently taking?

Do you have...

Genital Herpes?

Group B Strep Positive?

Pre-Term Labor?

Gestational Diabetes?

Preeclampsia?

HIV Positive?

Do you know the location of the placenta?

Have you ever been sexually or physically abused (we can discuss this in person, if you prefer)?

Can you describe your diet?

Are you taking prenatal vitamins?

To what extent do you drink alcohol?

Do you or anyone in your family smoke?

How active would you describe yourself?

How would you describe stress in your life currently?

How are you sleeping?

What do you know about your mother's labors and births?

Previous Births

Can you briefly explain your previous labors and births?

Birth weight and names:

Birth in relationship to your due date:

How long were you in labor?

How did labor begin?

Any complications?

Did you breastfeed with your previous children?

What is your plan for your other children during this labor and birth?

What is your plan for you pets, if any?

Preparation for Birth

Have you taken or planning on taking any childbirth preparation classes?

How else have you prepared for your birth?

Do you plan on breastfeeding?

If so, how long are you hoping to breastfeed?

Who is planning on witnessing the birth?

Can you describe their ideal roles during your labor and birth?

Labor and Birth

If you are planning a hospital birth, how long are you hoping to laboring at home?

Are you planning on any pain medication for pain management?

How do you feel about induction?

How do you feel about cesarean section?

How do you feel about episiotomies?

What are your fears about your labor?

What are your fears about your birth?

Is there anything in particular that you feel you need to “fight” for?

One a scale of 1 to 100, how would you rate labor when it is at its hardest?

What coping techniques are you planning on incorporating (i.e. walking, relaxation, shower/bath, massage, position changes, encouragement, moaning, guided imagery, etc.)?

Ideally, how are you hoping to welcome you child...

Mirror/touch baby just prior to birth?

Partner to cut the cord?

Baby placed immediately on Mom?

Newborn procedures delayed?
Circumcision?

Describing Yourself

How would your friends describe you?

Are you someone who decompresses by being alone or by being with family and friends?

How do you think you will handle your upcoming labor?

Do you normally say what is on your mind, or tend to handle things internally?

How do you typically show love?

Doula Expectations

How do you see me supporting you?

Is there anything you feel I need to do?

Is there anything you dislike, or are sensitive to, that I should be aware of (physical touch, nudity, etc.)?

If you would need to be separated from your baby, would you like me to stay with you or go with the baby?

Do you wish for me to take photographs or video during your labor and birth? If so, at what points?