



Affix Patient Label

Doula Agreement

Patient Name: _____

Doula's Name: _____

Patient Date of Birth: _____

Doula's Contact Information: _____

Physician/Midwife: _____

Bronson wants to have a good working relationship with doulas. This document helps outline the role of doulas while they are working here. A signed copy of this agreement must be given to the hospital.

According to the guidelines from the Doula Organization of North America International (DONA):

- The doula's role is to provide physical and emotional support to a mother and their partner during labor and birth. Their goal is to help a woman have a safe and satisfying childbirth experience as the woman defines it.
- The doula offers comfort measures such as breathing, relaxation, movement and positioning. They may use or suggest measures such as massage, visualization, water therapy and use of a birth ball.
- Doulas specialize in non-medical skills and do not perform clinical tasks. They do not diagnose medical conditions or give medical advice. They do not make decisions for the mother. The healthcare provider is responsible to:
 - Focus on the safe delivery of the baby.
 - Assess and diagnose medical conditions and offer medical options.
 - Inform and educate a woman about the care they are receiving.
 - If the mother requires birth by cesarean section and is to receive a regional anesthetic (spinal or epidural), their certified labor doula may accompany them in surgery after placement of the spinal or epidural. They are to stay at the head of the bed, to coach and calm as needed.
 - If the surgeon or anesthesiologist asks the doula to leave for any reason, the doula will do so without discussion at the time of surgery. The register nurse (RN) circulator will direct the doula to a place to wait, until the case is completed.
 - If the patient requires a general anesthetic, the doula is not allowed in the operating room.

Our goal is to partner with the patient and their support system which may include a doula. The doula is working for the mother and is not an employee of the hospital or physician. As this patient's doula, I agree to the roles outlined. If the practice guidelines are not followed, the doula may be asked to leave the Labor and Delivery unit.

Patient Signature: _____ Date: _____ Time: _____

Interpreter's Statement: I have interpreted the text on this agreement to the patient, a parent, closest relative or legal guardian.

Interpreter's Signature: _____ ID #: _____ Date: _____ Time: _____

Doula Signature: _____ Date: _____ Time: _____