

Incredible Journey Birth Services

O:703.494.2797 C: 808.854.9894

E: Info@IncredibleJourneyBirth.com www.IncredibleJourneyBirth.com

Birth Doula Service Description and Agreement

As a birth professional, I am dedicated to supporting and empowering women and families during the childbearing year. This service description and agreement explains my scope of practice and our agreement to work together before, during, and after the birth of your baby.

- 1. **My Role as a Birth Doula.** I am a professionally trained childbirth assistant who helps a mother during pregnancy, throughout labor, and after birth to provide emotional, physical and informational support. During pregnancy, I assist you with discovering your concerns and preferences about childbirth and provide information about holistic and natural remedies to minor pregnancy discomforts. I may also use relaxation techniques such as massage, acupressure, rebozo, cranial massage, counter-pressure, hip squeeze and/or other physical comfort measures and breathing techniques prior to and during your birth.
- 2. **My Services.** I provide support via email, text, and phone, addressing any concerns you may have about your pregnancy and upcoming birth. We will have two prenatal visits, I will attend your birth, and we will meet for 1 postpartum visit. I also offer a "Baby Shopping 101" where I will accompany you and your partner for an afternoon to a select number of baby stores of your choice to educate you, help you try on, distinguish what you will and won't need for the first 6 months, bottle types, pacifier types, infant car seats and adapters, etc. and all other questions about baby items you and/or your partner may have (separate fee of \$100 applies).

This is the general schedule and plan:

- a. At the first prenatal visit, I will gather information about you and your concerns about and preferences for your birth. We will also discuss procedures for contacting me at the onset of your labor. Based on a questionnaire you complete prior to our visit, I will offer you some resources for you to review prior to our next visit.
- b. During the last four weeks of your pregnancy, we will meet to discuss your birth plan, practice comfort measures and ways your partner can support you during labor, go over vaccination information, circumcision information, NICU information, C-section information and answer your questions.
- c. When you believe you are in your labor, you will call me and we will go over your contraction pattern. Once your contractions are 4 minutes apart, lasting for 1 minute each and continuing in that pattern for at least 1 hour (first time parents) you'll call me as soon as possible and I'll plan to meet you at your home, the birth center or hospital. For parents expecting their 2nd (or more) child, you will call me when your contraction pattern matches the 7-1-1 pattern. I will come to meet you at our agreed upon location as soon as possible.
- d. I will remain with you throughout your labor and up until Mom and baby are resting safely in recovery. I will be there to help you initiate breastfeeding and assist with positioning and questions. Within the first three weeks postpartum, we will schedule our final visit to discuss your birth experience, bring your photos (if you desired), answer any questions you may have and visit with you and your baby. If I'm also hired as your postpartum doula I will begin as early as you desire (see postpartum contract).
- 3. **Your Responsibilities.** You agree to participate in the planning of your birth and to communicate openly with me about any questions and concerns about your pregnancy and birth, including:
 - a. Any special needs, health issues, medical conditions, emotional situations or concerns
 - b. Any medical procedures or hospital visits during your pregnancy
 - c. Updates of your prenatal visits with your primary care provider

During the course of working with me, you may have the use of items that must be returned to me at the end of our working relationship. Items may include books, videos, a birth ball, baby carriers, or other tools to be used prenatally or during birth. You can also borrow German formula from me in the event of an emergency and your cannot/are not breastfeeding. You understand that if any of these items are damaged or lost, you are responsible for replacing the exact item or paying the value of the item to me.

- 4. Confidentiality. You give me permission to take notes on things that you disclose to me pertaining to: you and your child with regard to your pregnancy, birth, postpartum period and any prior birth experiences. You understand that this information may be used by me, or my backup doula, only to help care for you while we're working together. The information will be kept under lock and key and any personally identifying information will be shredded after our relationship concludes. You understand and acknowledge this and hereby consent to such use of your personal and medical information.
- Contacting Me. Beginning three weeks before your due date, I remain on-call 24 hours a day, 7 days a week, and expect to be notified at the onset of your labor. If you go into labor prior to 37 weeks, I will still be available. You will receive my contact information from me at our first prenatal visit. I must be notified early in your labor and/or if your water has broken to allow time for me to arrange to meet you at home, or the hospital/birth center. I require 1 hour plus drive time to get to you in order to secure child care, grab my supplies and head out. You must do your best to give me required notice of labor onset; if you fail to notify me of your labor and I miss the birth of the baby because of that, you are not entitled to a refund.
- 6. **Backup Doula.** In the event that I cannot attend your birth due to illness, an unusually long labor, or other emergency, a backup doula will be provided. I will compensate her directly for attending your birth.
- 7. Fees. My fees are outlined below. A detailed description of my fees is included separately in my *Menu of Services*. I accept cash, personal checks, or online card payment via PayPal. A \$25 returned check fee applies.

Please s	elect one of the following Services:
*	Labor Support Only Package - \$1200.00
*	Labor Support + Childbirth Ed + Newborn Care -
	\$1500.00
*	Shopping with the Doula Day - \$100 for doula clients

Payment terms are as follows:

- Upon signing this agreement, you will pay a 25% non-refundable Deposit, which covers my time and the blocking of your estimated Due Date on my calendar from other potential clients.
 - The remaining 75% balance is due within 60 days of the date on this agreement. I will invoice you as a courtesy. If you are at or beyond 36 weeks gestation: the full fee is due within 7 days of contract signing. Should you need more time to pay, just contact me.

*	If we have agreed on other terms of payment, reduced fees, barter, etc. the details will be provided below:

- Other Providers' Charges. Any medical services you receive by medical providers, holistic care providers or other pregnancy- or labor-related expenses (including referrals from my resource list) incurred during the pregnancy or the birth are your responsibility.
- **Unexpected Circumstances and Termination of Services.**
 - a. If my failure to attend your birth is due to your failure to contact me, or you do not contact me in time to arrive at the birth, no refund is due. In the event that my failure to attend your birth is caused by circumstances out of anyone's control, no refund is due BUT I am happy to serve as your postpartum doula for a total of 12 hours, at no extra cost.
 - b. If my failure to attend your birth is due to my error, I will refund half the fee, unless a back up doula has been arranged for vou. I take pride in the back up doula's I use and make the best effort possible to match up the backup doula with my family's needs and personality. If, however, you do not like the doula and decide to not have her attend your birth, I am not responsible for refunding any part of the fee but, if you notify me during your birth about this I will try to send another doula if time permits OR offer my services as a postpartum doula for a total of 4 shifts in exchange.
 - You may decide not to use my services for any reason and you may terminate this agreement by notifying me in writing. You will forfeit any payments you have issued to me at the time of termination.
 - I may terminate this agreement at any time for any personal medical or family emergencies (in which case I will refund your fee in total), if you fail to keep your appointments, you do not make timely payments or you engage in any drug or alcohol abuse or other behaviors that put you or your baby at risk during your pregnancy.
 - PRECIPITOUS BIRTH: Should you have a precipitous birth and I miss the birth because of it, no refund is due. I will however, be happy to serve as your postpartum doula for up to 12 hours, should we both agree to this. This is done as a courtesy and out of respect for the relationship we've built. Precipitous births are rare and out of everyone's control; as such I do not consider missing the birth to be a mistake on my part or in any way avoidable.

- 10. Accepting my suggestions and education. You acknowledge that the suggestions or advice I give to you is informational and evidence-based. You agree to take my suggestions when given to help you achieve the birth that you have told me you want. I will not make recommendations against your care providers directions but will encourage proper positioning of baby, when to go to the hospital during labor, options for supplements for you to consult with your doctor about, etc. I expect you to take my suggestions when they directly correlate with your birth desires. I expect you to trust in me and follow the advice/suggestions I give. You are always welcome to ask questions of me or with your care provider and free to tell and/or your care provider if you are uncomfortable with something. My goals are to keep you and your baby safe, calm and empowered.
- 11. Insurance. You understand that I do not accept insurance, but I will provide you with receipts that you may submit to your insurance company or employer health plan. I cannot guarantee that the insurance company will reimburse you for my fees or for any related expenses you may incur for the pregnancy and birth.
- 12. **Understanding of Services.** You understand that as a birth doula:
 - Though I am well versed in birth and have sufficient education in it, I am not trained in any medical specialty as a health care professional and do not perform medical assessments or medical procedures. My role is to provide services of support, encouragement, and supplemental education.
 - b. I do not make decisions for you. I will help you get the information necessary to make your own informed decisions. I will also remind you if there is a departure from your Birth Preferences.
 - c. I will not speak for you to medical staff regarding matters where health care decisions are being made. I will discuss your concerns with you and, when asked, suggest options. I can support you in discussions with staff as your advocate, making sure you have the opportunity to discuss any concerns. You or your partner will speak on your own behalf and make decisions for yourselves.

You understand that birth is a natural process, and in order to have the birth you desire, you must be willing to participate fully in education, prenatal meetings, and communication with all who are involved. You accept full responsibility for the decisions that are made on your or your child's behalf and recognize that a variety of unforeseen circumstances could arise during pregnancy or your labor that require medical intervention or emergency medical treatment which could preclude your ability to have the delivery and outcome you desired or expressed in your Birth Preferences. You acknowledge that these events are out of my control. You understand that you assume primary responsibility for the birth of your child and to the extent permitted by law, you will not hold me or my practice responsible for any outcomes resulting from complications that are outside my control.

You acknowledge that you understand these risks by in	itialing here
	understanding between us and may only be changed in writing and signed by ble by a court, we agree that these terms will be severable from the agreement ect.
Please acknowledge your agreement and understanding of t	hese terms by signing below.
Client's Signature:	Date:
Partner's Signature:	Date:
Ooula's Signature:	Date:
Doula's Name : Danielle Rohrbaugh	Client's Name:
Street Address: 14659 Gap Way #264	Client Address:
City, State, Zip: Haymarket, VA 20155 Email Address: Info@IncredibleJourneyBirth.com	City, State, Zip:Client Phone:
Service Selected:	
Date Deposit Paid: Amount:	Method of Payment:
Data Rajanca Paid: Amount:	