

Doula Report for the Month of: _____

Doula Info:

1. How many births did you attend in the month? _____
2. Did you need a back up Doula? Y/N If yes, who? _____

Any notes you would like to include on any of the births you or your back up attended. Please note complications, vaginal, c-section, vacuum, or any other info you think would be helpful.:

3. Is there anything you felt you could have done better?

4. Is there anything you felt you learned or did really well?

5. How many phones calls did you receive inquiring about Doula services? _____
6. How many interviews? _____
7. How many hired you? _____

Please provide the following information about each client on the back of this form. Client name, phone number, EDD, Care Provider, Location of Birth, and how they heard about you. This info will only be seen by owners of WRM and will solely be used for our own statistics and follow up. If you would prefer to provide a copy of the contract that will remain confidential as well.

8. Is there anything that WRM could do to offer more support, education, or marketing for you?

Doula signature:

Entered by:

Date:

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