The Baby Lady
CBE Student Info

**Personal Information:**

Mother's Name**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** Husband/Partner's Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Home Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ City, State, Zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Age\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_ Age\_\_\_\_\_\_\_\_\_\_ Date of Birth\_\_\_\_\_\_\_\_\_\_\_\_\_

Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_ Home Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred Method of Contact: Cell Home Email Preferred Method of Contact: Cell Home Email

Besides your partner, who will be present at the birth? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **Health Information:**

Expected Due Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Do you know the baby’s gender? Boy Girl We want a surprise!

Has your caregiver changed your Due Date? **YES NO**  If yes, Why? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OB/Midwife: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Caregiver's Practice Name and Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Hospital/Birth Center: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other Providers (i.e., Chiropractor, Acupuncturist, Homeopath, Massage Therapist, etc.): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Do you have any special health issues with this pregnancy?

Why did you decide to take this class?

What books have you read about pregnancy and birth? Have you taken any other classes?

Tell Me What You Most Want to Learn!

To meet your needs from this class, what are the most important topics you would like to see covered? Rate your top choices, from 1 – for most important, on down. Leave blank anything you don’t especially need from the class.

|  |  |
| --- | --- |
| \_\_\_\_ Choosing a Caregiver | \_\_\_\_ Choosing a Birthplace |
| \_\_\_\_ Exercise/Nutrition | \_\_\_\_ Warning Signs in Pregnancy |
| \_\_\_\_ Signs that Labor is Beginning | \_\_\_\_ Inducing Labor |
| \_\_\_\_ Coping w/ Early Labor at Home | \_\_\_\_ When to Go to the Hospital |
| \_\_\_\_ Coping w/ Labor at Hospital | \_\_\_\_ Pain Medications |
| \_\_\_\_ Birth Plan | \_\_\_\_ Hospital Procedures |
| \_\_\_\_ Medical Interventions in Labor | \_\_\_\_ Cesarean |
| \_\_\_\_ Second Stage Labor: Pushing | \_\_\_\_ Postpartum |
| \_\_\_\_ Newborn Procedures | \_\_\_\_ Breastfeeding |

Any other topics that weren’t on the list?

 Tell Me What Teaching Methods Best Help You Learn

Rate these techniques. Put a 1 next to your favorite techniques, a 2 for less favored, and a 3 for those you like the least.

\_\_\_\_    Lecture with visual aids

\_\_\_\_    Videos

\_\_\_\_    Small group discussions

\_\_\_\_    Question and answer / large group discussions

\_\_\_\_    Hands-On Learning and Practice

\_\_\_\_    Games and Interactive Activities

\_\_\_\_    Homework and Handouts