



NASHVILLE CHILDBIRTH

Physician's Prescription for Doula Care

_____ is under my care for pregnancy, due on ____-____-____ .

This will be her first/second baby. Pregnancy has been uncomplicated.

Or complications – VBAC____, previous vacuum extraction____,

Epidural____, Mental/Emotional_____, birth trauma____ Other_____

I have prescribed for her to engage a professional birth assistant for:

_____ Home Care Antepartum Code V22.2 59425

_____ Home Care Postpartum Code V24.2 59430

_____ Lactation Consultation Support Code V24.1

_____ Doula Labor Support V22.2 Code 99499

_____ Education Services, Classes Code 99078

I feel that this support is medically necessary because of her desire to have a non-medicated birth and because of limited nursing support in the hospital.

_____ I have recommended Nashville Childbirth health care providers.

Jeannie Casey, AAHCC, CCE, CD (DONA), HBCE, PD

Certified professional childbirth Doula, Certified Childbirth Educator, Lactation Consultant, Postpartum Doula

Doctor Name _____

Address _____

Phone _____