

Fair Flowers

Birth Services

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Thank you for your interest in my services. I hope this packet of information will answer some of the questions you may have about me and the services I offer. I would also be happy to schedule a free initial consultation where you can get more information and meet me in person. We will discuss your health history and your reasons for wanting a midwife to attend your birth. We may even be able to listen to the baby's heartbeat, if you like.

I believe that the female body is uniquely and perfectly designed by God to give birth and that in most cases this will happen naturally. Of course, you can better your odds by learning how your body works, eating the proper foods, having the proper attitude and caring for yourself and your baby during pregnancy. Occasionally there are problems, and it is my responsibility to identify these problems and inform you of your options for correcting them. By and large, however, the birth process needs little interference or technology and seems to go much more smoothly and quickly when it occurs in the privacy of your own home with people you know and trust.

I am a Certified Professional Midwife, licensed by the state of Texas, and I have current CPR and Neonatal Resuscitation certifications. I have attended over 125 births and I have been the primary midwife at more than 75 births. I have trained birth assistants and/or apprentices in training who help me at each birth. We work in pairs to be able to handle the unexpected when we need to. However, the most frequent reason that we transport to the hospital is "failure to progress" rather than a medical emergency.

My role as a midwife is to be with you, share information, encourage you, support you and help you grow with this experience. Most of all I want to help you have a safe and blessed birth.

I welcome any questions you might have about my practice.

Sincerely,

Diane Weatherford, LM, CPM

Natural birth - Normal birth - Gentle birth - Home birth

My Philosophy

I believe that birth is a natural, normal process that needs little, if any, interference. A woman's body is uniquely made to nurture the unborn baby and to give birth at the proper time. I have a great respect for the natural forces of birth and for a woman's right to make an informed choice about where, with whom and how she gives birth.

Of course, this does not mean that I am unprepared to identify and handle problems when they occur. I have been trained to notice "red flags" when they appear, but to appreciate the value of a "wait and see" policy in all but the most urgent emergencies. I believe it is of utmost importance that there be an honest and trusting relationship between a midwife and her client, especially when a problem arises. I like to think that I am relaxed and easy-going while remaining alert to signs of possible problems.

I believe that prenatal, intrapartum and postpartum care provided by a midwife to low-risk women is superior in every way to that provided by the medical model of care. However, there are times when the proper treatment can only be found with a medical physician, and I strive to maintain positive relationships with obstetricians and doctors in this area. The services they provide and the knowledge they have are a blessing when they are truly necessary.

I expect my clients to educate themselves about pregnancy, labor and birth and I will do all I can to help you get the information you need to make informed, responsible decisions about your care and your birth. I encourage my clients to ask questions regarding their care and if I don't have the answer, I have other midwives, medical professionals, and midwifery texts that I can refer to to help you find the answer you need.

I look forward to supporting and encouraging my clients as they claim pregnancy and birth as their own.

Fees

My package fee is \$3000, which includes:

- Regular prenatal visits
- Basic lab work – ob panel, GBS screen, hemoglobin and glucose screening, urinalysis, newborn screenings, Pap smear
- Labor, birth and immediate postpartum care for mother and baby
- Postpartum visits at 72 hours, 2 weeks, and 6–8 weeks
- Midwife being available to client 24/7 by phone

This fee does not include:

- Ultrasound sonogram
- Birth kit (about \$35)
- Medications given to you during care (antibiotics, Rhogam, local anesthetic, etc.)
- Assistant Fee (\$150 due at the birth)
- Facility Fee if you choose to use the birth center in Gladewater (\$400 due by 36 weeks)

If you live further than 50 miles from my home, there is an additional \$150 fee. If you live further than 90 miles from my home, there is an additional \$300 fee.

Discounts

Cash Discount

Clients may receive a \$400 discount, reducing the package fee to \$2600, if they pay in full by the 32nd week of pregnancy.

Repeat Clients

Returning clients will be given an additional \$200 discount off of the package fee.

Payment

A non-refundable \$200 deposit toward the package fee is due at the first visit. When this deposit is paid, I become your care provider, being available by phone and seeing you as a client.

To receive the cash discount, the package price must be paid in full by 32 weeks gestation. I will gladly assist you in working out a payment plan to achieve this goal. If you do not pay in full by 32 weeks, then the full package price is due by 36 weeks gestation. If the package fee is not paid by 36 weeks gestation, NO OBLIGATION EXISTS FOR ME TO CONTINUE CARE OR ATTEND YOUR BIRTH.

Transfer of Care

Should you decide to terminate your care with us, or should it become necessary to transfer your care to a physician after your 32nd week but prior to labor, the fee for your care will be \$1900. If your care is terminated or transferred prior to your 32nd week, charges will be as follows:

\$200 initial deposit
\$75 each prenatal visit
\$80 each home visit
\$8 each hematocrit and blood glucose screen
\$15 each phone consultation
Plus labwork, which varies by tests administered

Any amount you have paid over and above these charges will be refunded.

Informed Choice & Disclosure Statement

According to Texas Law, Texas Occupations Code Ch. 203, the Midwife is required to disclose in oral and written form to a prospective client the limitations of the skills and practices of the midwife. This Informed Choice and Disclosure Statement meets these legal requirements.

In accordance with the Texas Midwifery Act, the midwife:

1. Assists only with normal childbirth except in an emergency situation that poses an immediate threat to the life of the mother or newborn.
2. Encourages each client to seek prenatal, postpartum, and newborn care if not offered as part of the midwife's service.
3. Advises each client to seek medical care if the client develops signs or symptoms of a complication related to pregnancy.
4. Does not use forceps or surgical instruments for any procedure other than cutting the umbilical cord or providing emergency first aid during delivery.
5. Does not remove the placenta by invasive techniques.
6. Does not advance or retard labor or delivery by using medicines or mechanical devices.
7. Does not administer a prescription drug except under the supervision of a physician licensed by the State of Texas, with the exception of oxygen and state approved prophylaxis to prevent blindness of the infant.
8. Does not knowingly or intentionally falsify or make false statements on a birth certificate application. (This offense is prosecutable as a felony of the third degree.)
9. Does not use professional titles in combination with the term midwife (example: R.N., Doctor, or registered/certified midwife), unless certified by NARM as a Certified Professional Midwife (CPM).
10. Has explained to the client all the other legal requirements which are applicable to the midwife's practice:
 - The newborn screening law requires every newborn to receive testing for certain diseases. A midwife is trained to do compulsory newborn screening, or has made arrangements for it to be done by an appropriate health care facility or physician.
 - A newborn baby must receive eye prophylaxis within two hours of birth to prevent possible blindness from infection.
 - A serology blood test for syphilis and hepatitis B is necessary during pregnancy and on admission for birth.
 - A serology blood test for HIV is necessary at the first prenatal visit and on admission for birth, unless the mother objects. The result of the test is confidential, not anonymous.
 - Communicable diseases must be reported.
 - Registration is necessary for both births and deaths.
 - Compliance with provisions of the Dangerous Drug Act and the Controlled Substances Act is necessary, and other laws as applicable.
11. Has made this form available to clients in English and Spanish.
12. Has made the statistics specified by the Texas Midwifery Board available to each client (see next page under Midwifery Experience).

Should the client have a complaint about the care she receives from the midwife, she may contact the local law enforcement authority or notify the Midwifery Program, orally or in writing:

Texas Department of State Health Services
Midwifery Program
Professional Licensing and Certification Division
1100 West 49th Street
Austin, TX 78756
(512) 834-4523

MIDWIFERY EDUCATION & EXPERIENCE:

The expiration date of the midwife's license is: **March 2013**

The expiration date of the midwife's adult and infant CPR certification is: **Nov. 2011**

The expiration date of the midwife's Neonatal Resuscitation (parts 1-4) is: **June 2011**
Current certificates are required as part of the annual licensing of all midwives.

My medical backup arrangements are with: **I do not have medical backup. I do have consulting doctors -- Drs. Slovak & Mason in Mt. Pleasant.**

I am in compliance with all education requirements approved by the Texas Midwifery Board.
<YES> / no

I have practiced midwifery for 3 years.

Total number of births attended: **125+**

Total number of births as a primary care giver: **75+**

All of the above requirements and acts have been disclosed to me in detail in oral and written form and I understand them.

Printed name: _____ Signature of client: _____ Date: _____

Printed name: Diane Weatherford Signature of midwife: _____ Date: _____

(Each client will be given a copy of the signed original of this form. The original will be kept in their chart.)