
**Philadelphia Alliance for Labor Support
HUP Doula Program Orientee Checklist**

Orientee Name: _____

Mentor Name: _____

Date completed: □□/□□/□□

Volunteer/Medical Clearance:

- Health Clearance (TB test, MMR)
- Volunteer Name Tag
- CPR Certification (optional) Expiration Date: _____
- Hepatitis B Vaccine (optional) Date Completed: _____

Labor & Delivery Unit Orientation

- PALS Notebook
- Linen Cart: how to get scrubs, hats, shoe covers, gowns, blankets
- Introduction to staff
- Orientation to Labor and Delivery board
- Labor Room: bed controls, lighting options, supplies
- Shower & Jacuzzi controls
- Kitchen & microwave
- Review electric fetal monitor, pitocin/IV pump
- Postpartum floors: Dulles 2, 3, 6
- Intensive Care Nursery (ICN): Ravdin 8
- Locker room/scrubs
- Family waiting area
- Cafeteria

Labor Support Techniques:

- Explains role of doula to client, family & friends
- Uses standard precautions when appropriate
- Makes and/or uses a hot compress
- Makes and/or uses a cold compress