

*“Strengthening Families,
One Mother at a Time.”*



Doula By My Side Program

Pettaway Pursuit Foundation provides non-medical support, peer-to-peer mentoring and home visitation along with specialized services to women who are at-risk or diagnosed with high-risk pregnancies.

A Doula* is a trained professional in maternal health who offers you:

- Emotional, physical and educational support
- Help to access community resources
- Help to schedule and get ready for prenatal visits
- Support to you and your family to prepare for the birth of a new baby
- Education on what to expect during pregnancy, labor and delivery
- Implement Trauma-Informed Care
- Education about breastfeeding, newborn care

**A doula does not take the place of your OB/Gyn.*

*To **REFER A MOM** to our DBMS Program, complete the Referral Form on the back.*

How Are Our Massachusetts & Rhode Island Results?

PPF's mission is to improve pregnancy, birth, postpartum, and NICU experiences along with achieving healthier newborn outcomes and empowering new mothers with resources and education on proper infant care. Since its inception, PPF has reported the following¹:

Increased Breastfeeding: 121/140 (86.4%) of our members breastfed their newborn

Decreased NICU Stays²: 19/140 (13.6%) of our members had an infant admitted to the NICU

Decreased Number of C-Sections²: 50/140 (35.7%) of our members had a Cesarean Section delivery

Decreased Preterm Births²: 15/140 (10.7%) of our members delivered preterm

Decreased Low Birth Weights^{2,3}: 3/140 (0.02%) of our members delivered at a low birth weight

¹ Data collected since 2015 to 2018.

² Due to the nature of our program, some members were received during this stage of their delivery. These results do not fully represent the benefits of the Doula By My Side Program.

³ Low birth weight: \leq 4lbs.

To become a PPF doula, please contact

Phone: (toll free) 1-844-PPF-DBMS / **Fax:** 610-553-5482 / **Email:** info@thepff.org / **Website:** pettawaypursuitfoundation.org

Headquarters: 11 Owen Ave, Lansdowne, PA 19050 / **Business Hours:** Mon-Fri at 9:00 AM – 5:00 PM



Provider Referral Form

Type of Doula Service: Prenatal Postpartum

Date: _____

Qualifying Insurance Name: <input type="checkbox"/> Tufts Health Plan <input type="checkbox"/> Other (specify) _____		Referral Person: _____ Phone Number: _____ Referral Organization: _____ Location: _____					
Member Name: _____		Member ID No _____	DOB: _____				
Phone _____	Alternate phone _____	Case Manager/PHW Coordinator/Support Staff name: _____					
Address: _____		Phone: _____					
EDD _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center; padding: 5px;">G</td> <td style="padding: 5px;">_____</td> </tr> <tr> <td style="text-align: center; padding: 5px;">P</td> <td style="padding: 5px;">_____</td> </tr> </table>	G	_____	P	_____	Gest. age _____	Medical history _____
G	_____						
P	_____						
Social issues: _____							
Referral Reason _____							

Please email or fax this form to:
E: mardbmsreferral@theppf.org
F: 610-553-5482

Questions? Call us at 1-844-PPF-DBMS
www.pettawaypursuitfoundation.org