

Choosing Your Care Team



You don't pick one provider — you pick a team. Most pregnancies use more than one.



Insurance and in-network status shapes the practical options. Get that info early.



Switching providers mid-pregnancy is allowed. If it's not working, change.

The different roles

- ▶ OB-GYN — a medical doctor trained in surgery, complications, and the full range of pregnancy care.
- ▶ Certified Nurse-Midwife (CNM) — trained in low-risk pregnancy and birth, often a more relational approach.
- ▶ Doula — non-medical birth and postpartum support: emotional, informational, and physical. Doesn't deliver babies.
- ▶ Reproductive Endocrinologist (RE) — the fertility specialist. You see one for IVF/IUI or trouble conceiving.

Which one do you actually need?

- ▶ Straightforward pregnancy, medicalized model: OB-GYN at a hospital.
- ▶ Low-risk, less intervention: midwife (hospital, birth center, or home).
- ▶ Continuous emotional support regardless of who delivers: doula on top of either.
- ▶ 12+ months of trying (6 if you're over 35) with no luck: reproductive endocrinologist.

Questions to ask before choosing

- ▶ What's your C-section rate? US average is around 32%.
- ▶ What's your philosophy on inductions, epidurals, and other interventions?
- ▶ Who covers when you're off? Will I see the same person, or a rotating practice?
- ▶ How accessible are you outside appointments — for the inevitable 2am questions?

Gaux Note

The right team is the one whose philosophy you trust enough to relax around — and the team that respects your feelings and your insights along the way.