

Thank you for your interest in having Dr. La provide your obstetrical care. Please complete the form below and email to sharshman@doctorla.com so it can be reviewed. We will notify you, via email, of Dr. La's decision as well as pricing information. **Please allow two (2) business days for review.**

OB History – International Patients

1. Your name as it appears on your passport and the country you will be traveling from (*last name, first name, middle name*)
2. Is the name on your passport under your married name? If no, what is your married name?
3. What name do you want to be addressed by? (*First name, last name*)
4. What is your husband's/**partner's** name:
5. Your date of birth? Month, Day, Year
6. Are you currently receiving prenatal care in your country for this pregnancy?
7. A valid email address
(In order to ensure timely correspondence, please list ONE email address ONLY - provide the email address you use most often)
8. How many times have you been pregnant including this pregnancy?
9. How many living children do you have?
10. Is this an IVF (in vitro fertilization) pregnancy?
11. Are you pregnant with twins? If so, what is the chorionicity and amnionicity of the twins? (Your physician may have to provide this information to you.)
12. At the time of your baby's birth, how old will you be?
13. Were previous deliveries by c-section or vaginal delivery?
14. Have you had any complication with this pregnancy or previous pregnancies? (example: high blood pressure, HIV, preterm labor, diabetes or gestational diabetes, etc.) If diabetic, are you on insulin or oral medications? Please provide the medications you are using and the dosage.
15. Do you have a history of fibroids, ovarian cysts or surgeries? If yes, please provide details and year.
16. Do you know your Genotype/Sickle Cell ? If yes, what is it?
17. First date of your last menstrual period
18. Estimated delivery date of baby
19. Can you accept blood transfusions if it became necessary?
20. Date you plan to arrive in Houston?
21. Do you have a current VISA?
22. Do you have insurance that can assist you with your obstetrical (physician, hospital, anesthesia, pediatrician, etc.) costs?
23. Who referred you to Dr. La?