

BIRTH

ORAL HISTORY ARCHIVE

INTERVIEW 1 INFORMATION SHEET

BIRTH Oral History Archive

Study ID: HUM00217596

Date of Interview:

Interview ID:

Narrator Age at Contribution Birth:

Number of Children:

TWINS

Birth Order Position:

Birth Order Position:

Date/Year of Birth:

Date/Year of Birth:

Sex Assigned at Birth:

Sex Assigned at Birth:

Location of Birth:

Birth Setting: HOME HOSPITAL BIRTH CENTER OTHER

Birth Setting NOTES:

Care Provider: NONE OB/GYN MIDWIFE OTHER

Care Provider NOTES:

NOTES

Date of Interview 2: Scheduled NOT Scheduled DECLINE

Contributing Media Assets YES NO UNDECIDED; follow-up

Requested Anonymity YES NO