

Informed Consent for Midwifery Services

Practice Philosophy

Childbirth is a normal, life-affirming, event with lasting social, emotional, and physical effects. Because these natural female processes are time-tested and proven, I expect that your journey through pregnancy and birth will be healthy, with a good outcome.

Excellent prenatal care is the most important factor in having a successful pregnancy and birth with minimal complications, and we will share this responsibility equally. Continual education is part of my practice style and I enjoy teaching pregnancy self care in a spirit of community.

Experience and Education

I graduated with a Master's degree from Midwives College of Utah completing a program that consisted of didactic knowledge as well as clinical skills. I completed a two-month internship at a high-volume birth center where I gained proficiency in skills infrequently used at normal homebirths; this was a huge advantage in my training. Most of my experience has been gained from apprenticeship with four different midwives over two years. In addition, I attended The Farm's Advanced Midwifery Workshop for uncommon skills such as breech presentation and twins. At present, I have attended around 110 births in varying capacities.

I was formally trained as a doula and worked supporting laboring women in this capacity for two years. I also worked as a counselor at a specialized store for breastfeeding women and babies where I learned general lactation support skills. I lecture publicly and privately on Natural Family Planning, breastfeeding, circumcision, birth politics, and natural childbirth.

In order to maintain current credentials and licensure, I am continually certified in neonatal resuscitation (biannually) and CPR (annually).

Midwifery Services and Responsibilities

I provide prenatal care from conception to birth, postpartum and newborn care until 6 weeks after birth, and well-woman care for non-pregnant women. Similar to obstetric care, our appointments will be at my office every four weeks until 28 weeks of pregnancy, and then every 2 weeks until 36 weeks of pregnancy when we will have a visit at your home. From 36 weeks until birth, appointments are every week at my office. Postpartum care includes two home visits, about 24 hours and 3 days after birth. One-, three-, and six-week postpartum visits will be at my office.

Various testing is offered in pregnancy, these tests are available either in my office, or by referral to another provider. The testing I require is an obstetric panel (blood work) near the beginning of pregnancy and a recheck of hemoglobin levels (with a finger stick) in the later stages of pregnancy. Other testing will be recommended as needed based on conditions and symptoms, or at your request.

After 36 weeks of pregnancy I will be on-call for you until you give birth or I will provide appropriate backup. If I am with another woman in labor or at another birth, I will send my assistant (with whom you will be familiar) until I can arrive. I have never missed a birth due to two women birthing at the same time.

Medical Transfer Plan

During the course of your pregnancy and birth, things may go beyond normal bounds and it is my goal to restore normalcy, if I can. If not, I will deal with the complication appropriately, which may involve consulting with, or transferring you to a medical care provider. Because of the long-lasting effects of your birth experience, your desires will be valued highly, second only to safety. If we have mutually determined that you need or desire medical care, I will strive to make this transfer as smooth as possible.

Parents' Responsibilities

Please respect my time and training, specifically with regard to scheduled appointments, phone calls during appropriate hours for non-urgent issues, full disclosure of your birth plans, and, most importantly, my recommendations for urgent transfer to medical care.

Be completely honest regarding: previous medical and pregnancy history, current exposure to disease, infection, or illness, medications you are taking including herbs, prescriptions and over the counter drugs, recreational drug use, and contact with any other care providers.

Be involved in your own care and self-education; for first time parents this will usually necessitate attending a formal class. Obtain high quality food and make dietary changes, as we deem necessary.

Legal Issues and Grievances

Homebirth midwifery is legal in Utah, as per Utah State Code Title 58 Chapter 77. If you have questions about the rules I must follow, I can provide you with this information. I am not covered by liability insurance because it is not available to midwives in our state. If you have complaints about the care you receive, please notify me first in person, by phone, or in writing. If this proves insufficient, the Utah Midwives Association has a peer review process or complaints may be filed with the Division of Professional Licensing.

Parents' Declaration

We agree to give honest and complete information to our midwife and to participate in our own care as outlined in this document. We are comfortable with our midwife's qualifications and experience, and we have had our questions sufficiently answered and resolved. We realize there are risks associated with birth in any setting, and we have evaluated these risks as well as the benefits of midwifery care and we fully understand and accept responsibility for our choice to birth at home.

Mother _____ Date _____

Father/Partner _____ Date _____

Midwife's Declaration

I will provide care as per my scope of practice and as outlined in this document.

Midwife _____ Date _____