

## Best Start Birth Center Licensed Midwife Informed Consent and Disclosure Form

During the course of your care at Best Start you may receive care by midwives licensed, by the California Medical Board as “Licensed Midwives”, or “Certified Nurse Midwives”, licensed by the Board of Registered Nursing. Both of these types of professional health care practitioners offer primary care to healthy women and their normal unborn and newborn babies throughout normal pregnancy, labor, birth, postpartum, the neonatal and inter-conception periods. Because of the different pathways to becoming a midwife in California, licensing is complex, as each board has different requirements.

The California Medical Board requires Licensed Midwives to disclose the following as a requirement of licensure when acting as a primary provider of midwifery care. While the wording of this disclosure is written only in regards to licensed midwife(s) at Best Start Birth Center, your care will be provided by Certified Nurse Midwives as well. Thank you for your attention to this mandatory disclosure.

I understand that the licensed midwife, although licensed by the Medical Board, is not licensed to practice medicine. I am not seeking a licensed physician as the primary caregiver for this pregnancy, and I understand that the midwife shall inform me of any observed signs or symptoms of which may require evaluation, care or treatment by a medical practitioner. Best Start Birth Center has referral options and provisions should I need to transfer to a physician or hospital. If the Licensed Midwife recommends transferring for physician care I agree to transfer.                     Initial

**Section 2508 of the Business and Professions Code requires that a licensed midwife shall make the following disclosures in oral and written form.**

1. All of the provisions of Section 2507 of the Business and Professions Code have been explained to the client, (Section 2507 included below).                     Initial
2. I am retaining the services of Nancy Baird LM CPM/Marlisa Ivers LM CPM who is a licensed midwife, not a certified nurse midwife, is not supervised by a physician and surgeon, and is an of employee Best Start Birth Center/Best Start Midwife Services.                     Initial
3. I understand that the license status of Nancy Baird LM CPM/Marlisa Ivers LM CPM is current and unrestricted and her license number is: LM311.                    Initial
4. I understand that Nancy Baird LM CPM/Marlisa Ivers LM CPM does not have hospital privileges.                     Initial
5. I understand that Nancy Baird LM CPM/Marlisa Ivers LM CPM does have liability insurance for the practice of midwifery at Best Start Birth Center                     Initial I also understand that many physicians and surgeons do not have liability insurance coverage for services provided to someone having a planned out-of –hospital birth.                     Initial
6. I understand that if I am advised to consult with a physician and surgeon, failure to do so may affect my legal rights in any professional negligence actions against a physician and surgeon, licensed healthcare professional or hospital.                     Initial
7. I understand that there are conditions that are outside the scope of practice of a licensed midwife that will result in a referral for a consultation from, or transfer of care to, a physician and surgeon.                     Initial
8. I understand that the specific arrangements for the referral of complications to a physician and surgeon for consultation are according to the Policies and Procedures and Practice Guidelines for the Best Start Birth Center.                     Initial
9. I understand that the specific arrangements for the transfer of care during the prenatal period, hospital transfer during the intrapartum and postpartum periods, and access to appropriate emergency medical services for mother and baby if necessary are local area hospitals. For example, Scripps Mercy Hospital, UCSD, Kaiser, Sharp Grossmont Hospital, and Sharp Mary Birch Hospital.                     Initial
10. I understand that if during the course of care my midwife informs me that I have a condition indicating the need for a mandatory transfer, the licensed midwife shall initiate the transfer.                     Initial
11. I understand that consultation with a physician and surgeon does not alone create a physician/patient relationship or any other relationship with the physician and surgeon. I understand that Nancy Baird LM CPM/Marlisa Ivers LM CPM and any physician and surgeon with which she consults, are not employees, partners, associates, agents, or principals of one another. I also understand that Nancy Baird LM CPM/Marlisa Ivers LM CPM is independently licensed and practicing midwifery, and in that regard is solely responsible for the services she provides.                     Initial
12. Complaints about the quality of care provided by the licensed midwife may be reported to the Medical Board of California by telephone at (800) 633-2322 or via the Board’s website at [www.mbc.ca.gov](http://www.mbc.ca.gov).

Additionally, the current laws regulating licensed midwifery practices and the procedure for reporting complaints to the Medical Board of California, as well as the status of individual licensed midwives and physicians may be verified by contacting the Medical Board's Consumer Information Unit by telephone at (916) 263-2382 or via the Board's website.

Signature of client: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Best Start midwife: \_\_\_\_\_ Date: \_\_\_\_\_

### Section 2507 of Business and Professions Code

- (a) The license to practice midwifery authorizes the holder to attend cases of normal pregnancy and childbirth, as defined in paragraph (1) of subdivision (b), and to provide prenatal, intrapartum, and postpartum care, including family-planning care, for the mother, and immediate care for the newborn. (b) As used in this article, the practice of midwifery constitutes the furthering or undertaking by any licensed midwife to assist a woman in childbirth as long as progress meets criteria accepted as normal. (1) Except as provided in paragraph (2), a licensed midwife shall only assist a woman in normal pregnancy and childbirth, which is defined as meeting all of the following conditions: (A) There is an absence of both of the following: (i) Any preexisting maternal disease or condition likely to affect the pregnancy. (ii) Significant disease arising from the pregnancy. (B) There is a singleton fetus. (C) There is a cephalic presentation. (D) The gestational age of the fetus is greater than 370/7 weeks and less than 420/7 completed weeks of pregnancy. (E) Labor is spontaneous or induced in an outpatient setting. (2) If a potential midwife client meets the conditions specified in subparagraphs (B) to (E), inclusive, of paragraph (1), but fails to meet the conditions specified in subparagraph (A) of paragraph (1), and the woman still desires to be a client of the licensed midwife, the licensed midwife shall provide the woman with a referral for an examination by a physician and surgeon trained in obstetrics and gynecology. A licensed midwife may assist the woman in pregnancy and childbirth only if an examination by a physician and surgeon trained in obstetrics and gynecology is obtained and the physician and surgeon who examined the woman determines that the risk factors presented by her disease or condition are not likely to significantly affect the course of pregnancy and childbirth. (3) The board shall adopt regulations pursuant to the Administrative Procedure Act (Chapter 3.5 (commencing with Section 11340) of Part of 1 of Division 3 of Title 2 of the Government Code) specifying the conditions described in subparagraph (A) of paragraph (1). (c) (1) If at any point during pregnancy, childbirth, or postpartum care a client's condition deviates from normal, the licensed midwife shall immediately refer or transfer the client to a physician and surgeon. The licensed midwife may consult and remain in consultation with the physician and surgeon after the referral or transfer. (2) If a physician and surgeon determines that the client's condition or concern has been resolved such that the risk factors presented by a woman's disease or condition are not likely to significantly affect the course of pregnancy or childbirth, the licensed midwife may resume primary care of the client and resume assisting the client during her pregnancy, childbirth, or postpartum care. (3) If a physician and surgeon determines the client's condition or concern has not been resolved as specified in paragraph (2), the licensed midwife may provide concurrent care with a physician and surgeon and, if authorized by the client, be present during the labor and childbirth, and resume postpartum care, if appropriate. A licensed midwife shall not resume primary care of the client. (d) A licensed midwife shall not provide or continue to provide midwifery care to a woman with a risk factor that will significantly affect the course of pregnancy and childbirth, regardless of whether the woman has consented to this care or refused care by a physician or surgeon, except as provided in paragraph (3) of subdivision (c). (e) The practice of midwifery does not include the assisting of childbirth by any artificial, forcible, or mechanical means, nor the performance of any version of these means. (f) A midwife is authorized to directly obtain supplies and devices, obtain and administer drugs and diagnostic tests, order testing, and receive reports that are necessary to his or her practice of midwifery and consistent with his or her scope of practice. (g) This article does not authorize a midwife to practice medicine or to perform surgery. (Amended by Stats. 2014, Ch. 71, Sec. 3. Effective January 1, 2015.)