

Informed Disclosure and Consent for Midwifery Care

Philosophy:

Pregnancy and Childbirth is a profound emotional, spiritual and physical experience which has significant meaning to the mother, her family, and her community. Birth is a normal life process and not an illness. The birth process works best when unnecessary intervention is avoided. We believe that it is every woman's responsibility to educate herself regarding all aspects of her healthcare and we facilitate that process. She is the primary decision maker regarding her care. Continuity of personalized, individualized healthcare is one of the most important advantages of midwifery care. Midwives encourage family centered care.

Licenses, Education and Background:

- 1996 Certified Nursing Assistant
- 1999 Certified, Healing Touch Practitioner
- 2001 Graduate, Utah College of Massage Therapy
- 2006-Current, Hospital Birth Doula, Utah and Arizona
- 2007-Current, Childbirth Educator, EasyBirth.org
- 2011-2013 Full Time Midwifery Apprenticeship
- 2011-Current, Adult and Infant First Aid, CPR and AED Healthcare Professional Certification
- 2011-Current, American Academy of Pediatrics Neonatal Resuscitation Provider
- 2011-Current, Member, Arizona Association of Student Midwives
- 2013-Current, Member, Midwives Alliance of North America
- 2013-Current, Member, Arizona Association of Midwives
- 2013-Current, Member, North America Registry of Midwives
- Arizona Department of Health Licensed Midwife, License #LM180, Jan 2014, Expires 2016
- North American Certified Professional Midwife, License # 14030013, Feb 2014, Expires 2017

Services Provided:

- Prenatal visits are conducted at a minimum once every 4 weeks until 28 weeks gestation, once every 2 weeks until 36 weeks gestation and once a week until delivery.
- We will provide ongoing written and verbal information and education relating to all aspects of this pregnancy, birth and postpartum care. This includes progress, nutritional counseling, exercise, breastfeeding, any concerns, need for consultation or transfer of care to a physician, CNM and/or hospital, and available tests and procedures.
- One prenatal home-visit prior to 35 weeks.
- Labor and birth/delivery and initial newborn care in home.
- Postpartum and newborn care/visits which generally occur on day 1 or 2 and day 3 or 4, 1 or 2 weeks and 5 or 6 weeks.
- 24 hour availability to a Midwife.

The Health Insurance Portability and Accountability Act (HIPAA):

HIPAA gives you rights regarding your protected health information (PHI). We may use or disclose your PHI to carry out treatment or healthcare operations related to your care. Examples would be medical consultations, referrals, transfer of care, lab or ultrasound orders, insurance claims and/or peer review. You have the right to request a copy of your health records, request corrections be made to your health record, request all communications with us be restricted from unsecure transmissions IE: fax, email and voicemail or request that your records not be used during peer review. I understand the above statement regarding my rights.

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Consultation/Transfer of Care:

A licensed Midwives' scope of practice is limited to normal pregnancy and well women care. We will consult a physician or a Certified Nurse Midwife if complications or concerns arise according to AZ R9-16-112 (document available at www.azdhs.gov) and will refer to another provider when appropriate. Should any conditions arise which place the mother or baby at risk according to AZ R9-16-111 including but not limited to fetal distress, hypertension, mal-presentation, prematurity, post maturity, gestational diabetes, prolapsed cord, placenta previa or any other high risk problem, we will transfer care to a physician, CNM or medical facility and terminate Midwifery care. If these or any other complications arise during labor, we will transport/transfer care to the appropriate facility and provider. I understand the above statement regarding consultation and transfer of care.

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Risks:

Birth is generally a natural and safe process. There are potential risks involved in any delivery, whether at home or in the hospital. Risks of birth include but are not limited to the following: excessive blood loss, placental abruption, uterine rupture, eclampsia, mal-presentation, umbilical cord prolapse, shoulder dystocia, fetal distress, birth injuries, brain damage and death. Usually complications that need medical treatment are diagnosed in plenty of time to transfer care to a medical facility. However, there are absolutely no guarantees for a healthy live mother or baby either in the hospital or at home.

I understand that there are potential risks to myself and/or my baby during pregnancy, labor, delivery and the newborn and postpartum period.

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I understand that there is the possibility of a delay of additional medical treatment for myself and my baby because I am choosing to give birth out of the hospital setting. I understand that this delay of additional treatment may cause damage or death for myself or my baby.

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Required Tests/Treatments:

Blood type and RH factor, CBC, Syphilis, Rubella Titer, Antibody Screen, HIV, Hepatitis B & C, Urinalysis, Gonorrhea, Chlamydia, GBS Culture, Blood Glucose Screen and Ultrasound. Rhogam is recommended for RH negative women who experience vaginal bleeding during the pregnancy, at 28 weeks and after the birth of the baby if that baby is RH positive. A newborn genetic screen, vitamin K and antibiotic ointment are recommended for the newborn. ** After explanation and information is given about these tests, these tests may be declined (with the exception of syphilis testing). A written refusal will be required for any of the tests that are declined.*

I understand that the above tests are highly recommended and that there may be additional testing recommended for the health of myself and my baby. I additionally understand that I have the right to decline all testing and procedures with the exception of syphilis testing.

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Authorization to Treat:

I authorize any member of the birth team of Arizona Midwife, LLC to treat me and my baby as necessary. This includes prenatal exams, collection of blood, urine and vaginal samples for laboratory testing, physical and vaginal exams as necessary, administration of medications as directed by a physician, delivery of my baby, emergency episiotomy, perineal suturing, routine newborn care, emergency and resuscitative measures for myself or my baby, assistance with breastfeeding and any other related procedures that may be necessary for the health and safety of myself and my baby.

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Grievances:

If you have a grievance, please attempt a resolution with us first, knowing that we will make every reasonable attempt to resolve your issue. If this is not possible, the Arizona Association of Midwives and/or NARM can be contacted for a peer review and/or a complaint review.

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Consent:

I hereby agree to and understand this informed consent agreement. I accept responsibility for any potential risks of having a homebirth with a Licensed Midwife. I understand that Alicia Witt is not a doctor or nurse and does not carry malpractice insurance. I was given the opportunity to ask questions and understand the information provided. I choose to continue care with Arizona Midwife, LLC, an Arizona Limited Liability Company.

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Client Name: _____ Signature: _____ Date: _____

Midwife Name: Alicia Witt, Arizona Midwife, LLC Signature: _____ Date: _____