

Consult, Transport & Transfer of Care

Study Group Module

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Consult, Transport, and Transfer of Care

National Midwifery Institute, Inc.
Study Group Coursework
Syllabus

Description:

This module explores the dynamics of transporting into hospital or allopathic care during pregnancy, intrapartum, or postpartum, with an emphasis on emergency transport in labor. It includes recommended reading materials in print and online, and asks students to complete short answer questions for assessment, long answer questions for deeper reflection, and learning activities/projects to deepen your hands-on direct application of key concepts.

Learning Objectives:

- Identify to concepts of *consulting*, *transporting*, and *transfer of care* in the context of midwifery
- Identify occurrences when a *consult* may be indicated for client care, and individuals midwives might consult with
- Identify conditions which might necessitate a *transfer of care* into medical care for a client in pregnancy or postpartum
- Identify circumstances in first, second, or third stage of labor which would indicate the need for urgent transport to hospital
- Identify the practical steps of creating physician collaboration, consultation and transport plans.
- Identify the signs, symptoms, and indications for referral of select complications and conditions of pregnancy that affect the birth giver or fetus.
- Identify conditions that might necessitate a transfer of care into medical care for a neonate
- Identify local health care providers for neonates
- Understand the critical importance of having a hospital transport plan for home birth.
- Use of the principles of Midwives Model of Care to provide shared decision making and informed choice in transfer situations
- Identify specific steps you can follow to facilitate a smooth transport transition.
- Understand the role of the midwife as advocate in a hospital setting.

- Identify how your chart is your ally and a critical link in establishing clear communication in a clinical setting.
- Draft practice guidelines for arranging medical consultation, transfer of care, and transporting in your own practice.
- Demonstrate your ability to discuss issues of medical consultation, transfer of care, and transporting to the hospital with clients in the context of your preceptor's practice.

Learning Activities:

- Research and read appropriate study sources, seeking out additional study sources where needed
- Complete short answer questions in attached module document for assessment
- Complete long answer questions for deeper reflection in attached module document for assessment
- Complete learning activities listed in attached module document for assessment
 - Outline EMS/First Responder Course on Homebirth
 - Research Car Seat Installation and Distribution in your community
 - Draft Transport Coversheet for use in practice
 - Research and Practice After Action Reviews
 - Draft practice Guidelines for medical transport in your practice , including guidelines specific to cord prolapse, first stage, second stage, third stage, and newborn transports
- Submit work to Study Group Course Coordinator
- Reflect on feedback from Study Group Course Coordinator and re-submit work as needed

Study Sources (print):

Use keywords from the Learning Objectives to search the table of contents and index of the required reading listed below. Read those pages listed, and read the chapter in which they are found. Establish a context for the information so that you understand how other topics are related. In addition, flip through each text to familiarize yourself with the content of chapters. As you work through Study Group modules, you will eventually read each text in its entirety.

Required Reading (print/online):

Transporting is a critical area of expertise and, with the rise in popularity of birth outside the hospital, a few textbooks address transport issues. Oral tradition is vital, including experience with facilities in your community and individual doctors, and your midwifery community's collective experience, learned and observed through peer review and interview.

- Holistic Midwifery, Vol. I, Frye
- Holistic Midwifery, Vol II, Frye
- Varney's Midwifery, 6th edition
- Heart and Hands, Davis, 5th edition, newly revised and updated
- MANA Statement of Values and Ethics (see online resources)

Study Sources (online):

See NMI website Transport, Consult and Transfer of Care module web resources section for current online study sources for this module.

Related Modules:

- Artificial Rupture of Membranes
- Breastfeeding / Chestfeeding
- Cesarean and VBAC
- Fetal Heart Rate Patterns
- Birth Bag and Set Up
- Breech Birth
- Twins and Multiples
- Ectopic Pregnancy
- Fetal/Newborn Circulation
- Genetic and Prenatal Screening
- Grief and Self-Care
- First Stage
- Gestational Diabetes
- Hemorrhage
- Hypertension
- Meconium
- Apnea, Hypoxia and Respiratory Distress
- OP, Brow and Face Presentations
- Physical Assessment of the Adult
- Physical Assessment of the Newborn
- Post Dates Management and Post Maturity
- Perinatal Mental Health
- Preeclampsia
- Second Stage
- Shoulder Dystocia
- Substance Use and Abuse
- Third Stage
- Pharmacology for Midwives
- Postpartum Care
- Preterm Labor
- Spontaneous Release of Membranes
- Pregnancy Loss: Abortion, Miscarriage, and Stillbirth
- Pelvic Health, Birth Lacerations, and Suturing
- Herpes
- Jaundice

Submitting Module for Assessment:

Study Group modules are accepted electronically in PDF format *only*. We encourage you to submit modules as you complete them throughout each quarter of enrollment.

Please e-mail your completed Study Group module to:
 Study Group Course Work Instructor nmistudygroup@nationalmidwiferyinstitute.com

Once your module has been emailed to us, you will receive an email confirmation that we have received it. Study Group modules are reviewed and returned in digital format as PDF documents. Modules can take up to 1 month from submission to be reviewed and returned to you. We will return your module as an e-mail attachment. Each module includes an Evaluation Sheet at the end of the pdf. The module's page on the student portal also includes a link to a fillable online module evaluation sheet. Please take the time to fill out the module evaluation sheet and return it to us for each module, it helps us to improve our course work.

Please follow these formatting guidelines when submitting modules:

- Your first initial and last name in title of PDF, along with name of module. Example: "ERyanFirstStage.pdf"
- Title of module on the document's front page
- Your name on the document's front page
- Provide the text of each question, followed by a blank line and then your thoughtful answer (without the question, you have commentary without context)
- Blank line between the answer for a question and the next question: question, blank line, answer, blank line, question, blank line, answer...
- Please leave margin space for our comments!
- Don't use script or cursive writing style text
- Font size not smaller than 12
- Credit sources of direct quotes

Completion Requirements and Feedback:

In order to complete this module for graduation purposes from National Midwifery Institute you must review all resources, complete the attached short answer questions for assessment, long answer questions for deeper reflection, and learning activities/projects, and submit them as detailed above. Upon return to you, your coursework may have feedback or ask for additional information or exploration on certain topics. Your work will be evaluated in the following Rubric (pasted below). You must achieve a minimum score of **7.5** in order to move on to your next module, though we encourage all students to strive for a **10**.

	Level 1 (0 Points) Not Adequate	Level 2 (1 Point) Developing Adequacy	Level 3 (1.5 points) Meets Basic Expectations	Level 3 (2 points) Exceeds Expectations	Student Score
Completion of module prompts and elements	-Module not completed	-Major Elements of module are missing	-All aspects of module elements present, with some minor questions	-All aspects of module elements present and answered completely	

			unanswered or missing		
Demonstrates Comprehension of module content and concepts	- Lack of comprehension	- Responses are unclear and do not reflect basic comprehension of module concepts	- Responses are clear and reflect basic comprehension of module content and concepts	- Responses are clear, well written, and reflect in-depth comprehension of module content and concepts. Added subpoints and additional reflections demonstrate a deeper knowledge and curiosity.	
Analysis	- Key terms not defined	-Inaccurate definitions of key items -Limited connections made between evidence, subtopics and clinical experience	-Accurate definitions of key items -Connections made between evidence, subtopics and clinical experience -Incorporation of original ideas and incorporates some clinical experience in responses where possible	- Accurate definitions of key items -Strong connections made between evidence, subtopics and clinical experience	
Evidence	- No research evidence used	-Research not used -Research not clearly connected to questions asked in module	-Research is present but limited -Research presented is weak or not relevant to communities served by midwives	-Research is abundant -Research is compelling and relevant to communities served by midwives	
Engagement with Learning Resources	-Evident study sources were not utilized	-Evident study sources were partially utilized	-Evident that study sources were fully utilized	-Evident that study sources were fully utilized and independent research was undertaken -Full incorporation of original ideas, personal analysis and incorporates relevant clinical experience in all areas possible	

Skills

Following are Skills Logs which meet MEAC and NARM requirements for assessment of clinical readiness for entry-level practice upon graduation. Review the skills in each of the skills logs and

consider how they each relate to the content of this module. If you are currently working with a preceptor, take this opportunity to focus on these areas. During Supervised Primary Care you will formally evaluate these skills together using the NMI Complete Skills Logs: Prenatal Skills Log, Labor & Birth Skills Log, Newborn Exam Skills Log, Postpartum Skills Log, and the Additional Skills Log. To Download the Complete Skills Logs go to the [Apprenticeship Page](#) on the Student Portal.

Introductory and Further Thoughts:

Note: If you are aware that you have vicarious trauma or if you have recently or in the past had an experience with a difficult transport, we encourage you to work on the Grief and Trauma module in conjunction with the Transporting module. You are also welcome to contact the NMI staff for a confidential conversation.

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Module Submission Attestation

All students must complete **one attestation form along with each module submission**. This reminds students of submission guidelines and expectations. It is also a MEAC requirement. Please put your name, read the fine print, and check each box as indicated. Thank you!

First and Last Name:

Email:

I have submitted my module by email (required)

I have emailed my module to nmistudygroup@nationalmidwiferyinstitute.com. I have made sure I followed submission and formatting instructions carefully, as outlined in the module syllabus. I have submitted a .pdf document, and all project attachments as requested.

I have read the fine print. I have emailed my module.

The work I have submitted is my original work (required)

I have not plagiarized my work, rather, my work is in my own words and reflects my own unique ideas. When sourcing ideas from others, I have quoted, cited, and/or attributed their ideas properly. If there is any question about the originality of my work, a Study Group Coursework Coordinator will contact me.

I have read the fine print. I certify that I have submitted original work.

I have submitted a module feedback form (required)

I understand I must submit at least ten module feedback forms throughout my time completing Study Group Coursework. These module feedback forms solicit student feedback in order to improve modules and keep them relevant and up-to-date for optimum student education.

Yes, I submitted a module feedback form for this module

No, I have not chosen to submit a module feedback form for this module.

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Short Answer Questions

Short Answer Questions:

1. As midwives, we will frequently be challenged with clients presenting symptoms, conditions, and questions that puzzle or concern us. When this occurs, we may want to consult with others for advice in how best to proceed. Explain how/if you are currently utilizing the following for consult about client care questions:

- a. Other midwives
- b. Peer Review Groups
- c. Other holistic health care professionals
- d. Physicians, OB/GYNs, Pediatricians, and other Doctors
- e. Social media, Listservs, and other mass communication

2. Under what circumstances would you formally consult with a physician for client concerns:

- a. In pregnancy
- b. In labor
- c. For a newborn
- d. During the postpartum period

3. What is the difference between a *consult* and a *transfer or care*? Who determines if care is *transferred* to another healthcare provider?

4. List circumstances in which you would consider semi-urgent transport/transfer of care to a hospital for a client:

- a. In pregnancy
- b. In first stage of labor

- c. In second stage of labor
 - d. In third stage of labor and immediate postpartum
 - e. For a newborn
 - f. During the postpartum period
5. List circumstances in which you would consider *urgent transport/transfer of care* to a hospital for a client:
- a. In pregnancy
 - b. In first stage of labor
 - c. In second stage of labor
 - d. In third stage of labor and immediate postpartum
 - e. For a newborn
 - f. During the postpartum period
6. If you have determined a transport to be *semi-urgent*, how may a client be transported to hospital? If you have determined a transport to be *urgent*, how may a client be transported to hospital?
7. What preparations do you make so that you are familiar with the route from each client's home to the hospital?
8. Discuss the process of calling emergency medical services (EMS) in your community:
- a. How do you get in touch with emergency medical services? Who do you call?
 - b. What critical pieces of information must you have ready when calling EMS?
 - c. What happens next?: Who arrives first and what are they likely to do?
 - d. How is it determined which hospital to transfer to? Can you request a different hospital?
9. Do you ride in the ambulance with a client during a transport situation? Do you stay with your client in the hospital? For how long and under what circumstances?
10. If a client and/or their newborn is staying in the hospital for any period of time, how often do you visit? What do you do during those visits?
11. What is an "After Action Report"? What is a "Near Miss Audit"? How might these be utilized in a midwifery context?

Continued.....

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Long Answer Questions for Deeper Reflection

Questions Requiring Longer, More Thoughtful Answers:

12. Discuss the signs, symptoms, and indications for referral for each condition listed below (a-k). In your state of practice is it within the CPM's scope of practice to be a primary care provider for a person with this condition?

- a. anemia
- b. asthma
- c. HIV infection
- d. thyroid disorders
- e. diabetes
- f. cardiac conditions
- g. malpresentation/abnormal lie
- h. placental disorders
- i. pre-term labor
- j. post-dates pregnancy
- k. hydatidiform mole

13. List the conditions that might necessitate referral or transfer of care into medical care for a neonate.

14. What are your local regulations regarding physician consult and midwifery licensing? Are midwives required to have any degree of physician "supervision"? Are they required to have a consulting doctor?

15. How will you, as a new midwife, go about finding other midwives and holistic healthcare professionals to consult with, as well as physicians to consult with?

16. What experience do you have with *transfer of care* to medical providers during pregnancy or postpartum? How was this received by clients? By the receiving physician?

17. When do you begin the discussion with clients about homebirth and transporting? What do you say?

18. What are the expectations of the local hospital regarding midwifery transports from a home birth? (If you're at a birth center, also include that scenario.)

19. Describe how you can assert yourself as the midwife with EMS and insist on your own presence and expertise during a transport.

20. Identify specific steps you can follow to make a smooth transport transition.
21. Describe some effective techniques for communicating in a difficult transport situation.
22. Describe the role of the midwife as advocate in a hospital setting. How does Shared Decision Making and informed choice/consent aid you, as the midwife, in advocating for your client?
23. How does a midwife's legal status impact a client's access to pregnancy- or birth-related medical care?
24. Briefly reflect on the role of colleagues, family, peer review groups, and midwifery community in debriefing difficult transports. For greater detail, please see the NMI Study Group Module **Grief and Self-Care**.

Continued.....

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Projects/Learning Activities

Projects(send completed projects with the rest of your course work for this module)

25. Research the local health care providers who provide or specialize in newborn care. Consider allopathic and non-allopathic care providers (i.e. pediatricians, cranial-sacral practitioners, acupuncturists, etc.). Create a list of these providers for consults/referrals and for sharing with clients.
26. Review the Home Birth Summit Best Practice Guidelines: Transfer from Planned Home Birth to Hospital (as linked in the NMI website **Consult, Transport and Transfer of Care** module web resources section). Write a reflection on the document and how you may or may not like to adapt it to your practice.
27. Review available Transfer of Care paperwork and protocols in pregnancy and postpartum. Create your own template forms for Transfer of Care in Pregnancy and Transfer of Care Postpartum for use in your practice. Be sure to also include a checklist of other paperwork you plan to include in the document sharing with the new practitioner.
28. Create or adapt an urgent transport cover sheet for use in your own practice. Review available examples from NARM and your local community as necessary.
29. Research the practice of After Action Review/After Action Report and Near Miss Audit. Create a simple, constructive template for use in your practice.

30. Complete the attached Practice Guidelines worksheets. These worksheets will serve as the basis for your professional Clinical Practice Guidelines you will draft before graduation. Fill them out as if you are a midwife in primary practice, and fill them out in the way *you* plan/want to practice. For additional guidance on Practice Guidelines, see the Practice Guidelines page on the NMI Student Portal.



Practice Guidelines Worksheet

Practice Guidelines form the blueprint for your rationale and procedures of your future midwifery practice. They should lay out your midwifery management plans for selected topics in enough detail that you can follow, share, and turn to them for guidance - but not too much detail as to be potentially incriminating if you don't follow them to the letter. Your submission here is a first draft, upon which we will provide feedback. You are expected to revise, reformat, and compile all your Practice Guidelines in your final submitted module at NMI: "Charting and Practice Guidelines". This macro Handbook of Practice Guidelines is also required by NARM and many state licensing agencies.

Consultation and Transfer of Care

Drafted by: *[your name]*

Date:

Date of Next Review: *[typically in 3-5 years]*

Background

Here you write a quick summary that introduces the topic, why you care about it as a midwife, and includes any pertinent definitions that may need to be cited for terms used in your guideline. Statistics of frequency or rarity in practice may also be welcome here. This is typically 1-2 paragraphs.

Conditions that Require Consult or Transfer of Care

Add as long as you need to this list. Be sure to consider pregnancy, first stage, second stage, third stage, postpartum, and newborn indications.

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Procedure: Facilitating Consultation

Here you write how you, as a midwife, will consult with specialists as needed. Consider including different types of specialists (lactation, pediatrician, OB, holistic practitioners, etc.). How do you consult? What records do you send? Do you consult directly (phone call, written?) or does the client go for an appointment for their own consult? Are referral forms indicated?

Procedure: Transfer of Care

Here you write how you, as a midwife, will transfer care to alternate prenatal/labor professionals (CPM,CNM, OB, other). How do you ensure official transfer of care? How will you transfer client records? Discuss your Informed Choie procedures with clients.



Practice Guidelines Worksheet

Practice Guidelines form the blueprint for your rationale and procedures of your future midwifery practice. They should lay out your midwifery management plans for selected topics in enough detail that you can follow, share, and turn to them for guidance - but not too much detail as to be potentially incriminating if you don't follow them to the letter. Your submission here is a first draft, upon which we will provide feedback. You are expected to revise, reformat, and compile all your Practice Guidelines in your final submitted module at NMI: "Charting and Practice Guidelines". This macro Handbook of Practice Guidelines is also required by NARM and many state licensing agencies.

Emergency Hospital Transport

Drafted by: *[your name]*

Date:

Date of Next Review: *[typically in 3-5 years]*

Background

Here you write a quick summary that introduces the topic, why you care about it as a midwife, and includes any pertinent definitions that may need to be cited for terms used in your guideline. Statistics of frequency or rarity in practice may also be welcome here. This is typically 1-2 paragraphs.

Conditions that Require Urgent Hospital Transport

Add as long as you need to this list. Be sure to consider pregnancy, first stage, second stage, third stage, postpartum, and newborn indications.

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Procedure: Contacting 911 Dispatch

Here you write step by step what you will do when you need to call 911: what you relay and how you ensure they can reach you ASAP.

Procedure: Communicating Client's Situation with Receiving Responders

Here you write step by step what you will do when you need to communicate the client's situation to First Responders as well as to the receiving RN/OB/Pediatrician at hospital.

Procedure: Accompanying Clients to Hospital

Here you write step by step what you will do when you need to accompany a client to the hospital. How will you communicate this need to EMS and ride in the ambulance with the client?

Procedure: Ensuring Timely Reception of Client Records

Here you write step by step what you will do to ensure client records are received by the hospital you're transporting to.