

Wyoming Board of Midwifery

2001 Capitol Ave, Room 127

Cheyenne, WY 82002

<http://midwifery.wyo.gov>

Birth Reporting Form - \$50 Fee

The \$50 fee should ONLY be sent to the Board if the Midwife completes the delivery.

Wyoming Midwifery Rules, Chapter 7, Section 9 (b)(v): "Persons licensed by the Board shall report to the board outcomes of all clients for which they have provided services at any point during labor or delivery, within thirty (30) days after each birth."

1. Licensee Information

Name	License Number
Complete Address	

2. Client and Baby Information

Client Code (ID)		County of Birth	
Gravida/Para		Age of Mother	
Date of Delivery		Weight of Baby	lbs oz
Sex of Baby	<input type="checkbox"/> Male <input type="checkbox"/> Female	Est. Gestational Age	weeks
Apgars	1/_____	5/_____	10/_____
Method of Delivery	<input type="checkbox"/> Vaginal	<input type="checkbox"/> VBAC	<input type="checkbox"/> C-Section

3. Transport Information

Transport Necessary:	<input type="checkbox"/> Yes <input type="checkbox"/> No
Transport for:	<input type="checkbox"/> Mother <input type="checkbox"/> Baby
If transport occurred, describe in detail on a separate page, management and outcome. Include names of ambulance service, receiving hospital, physicians involved and all other pertinent information.	

4. Signature

Signature	Date
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