



Informed Disclosure of Midwifery Care

Life & Love Midwifery

This information is given to assist clients in becoming fully informed about their choice to obtain midwifery care. This midwifery care practice uses shared decision-making and fully informed consent and refusal with each of its clients. We believe that a mutually respectful relationship is essential in providing high quality maternal, newborn, and well person care.

Definition

“Licensed midwifery is the provision by a licensed midwife of the necessary supervision, care, and advice to a woman during pregnancy, labor and the 6-week postpartum period, conducting a normal delivery of a child in the setting of the client’s choice except a hospital”. (Alabama State Board of Midwifery Administrative Code, Chapter 582-X-3-.03)

Licensed Midwives are expected to practice in accordance with the midwifery scope of practice, the knowledge, clinical skills, and judgments described by the Midwives Alliance of North America, the Alabama State Board of Midwifery, and each individual midwife’s own practice guidelines.

For this document, the terms “**you**” and “**your**” refer to the client seeking midwifery care.

The terms “**we**” and “**our**” refer to Life & Love Midwifery, its midwives, and its students.

Legal Status and Insurance

Currently in the state of Alabama, midwives are required to be licensed by the Alabama State Board of Midwifery and must carry and show proof of Professional Liability Insurance in the amount indicated by the board. Certified Professional Midwives (CPM) and Licensed Midwives (LM) may not provide health care in a hospital.

Training and Experience

Rebekah Teel is a **Student Midwife**, studying to become a Certified Professional Midwife through Midwives College of Utah Bachelor of Science in Midwifery program, with plans to become licensed in the state of Alabama in 2025. Currently certified in Basic Life Support (BLS) and Neonatal Resuscitation Protocol (NRP).

(Other Midwives Information Here)

(Students Information Here)

Births may be attended by 1 or 2 midwives with up to two assistants or students.

Midwives Model of Care

Midwives believe that pregnancy and childbirth are normal life events that rarely need intervention. Midwifery care is personal, individualized, and hands-on. Midwives develop respectful, trusting relationships with their clients and encourage shared decision making while striving to provide evidence-based care. This form of care empowers clients to make informed decisions about their pregnancy, birth, and life. Midwives support their clients choices and offer care

throughout the childbearing year. Midwives offer prenatal care, labor support, birth care, postpartum care, newborn care, breastfeeding support, and other services.

“The Midwives Model of Care includes:

- monitoring the physical, psychological, and social well-being of the mother/birthing parent throughout the childbearing cycle
- providing the mother/birthing parent with individualized education, counseling, and prenatal care, continuous hands-on assistance during labor and delivery, and postpartum support
- minimizing technological interventions and
- identifying and referring women/birthing people who require obstetrical attention.

The application of this model has been proven to reduce to incidence of birth injury, trauma, and cesarean section.”
(<https://mana.org>)

Philosophy of Practice

The midwives at Life & Love Midwifery believe that birth is a normal, physiological part of life. We choose to incorporate shared decision making and evidence informed practice into our style of care. We believe that those who give birth are strong, intelligent, capable human beings who can choose where to give birth and whom to have in attendance. Healthy humans can usually give birth naturally and safely without interventions. We believe that babies are normally born without complications and should remain with their parents if possible. We believe that good nutrition and a healthy lifestyle are essential, especially during pregnancy. We believe that a well-trained and well-equipped out-of-hospital midwifery team offers healthy women and their families an opportunity to give birth in an environment of safety, confidence, relaxation, love, trust, and security. We believe that birth impacts life and that a gentle, natural birth is the best way for a baby to start life.

In choosing a community birth you are taking primary responsibility for all decisions, procedures, and outcomes regarding your prenatal, birth, postpartum, and newborn care. You acknowledge that you are contracting the midwifery services of Life & Love Midwifery and their associated midwives.

Services Provided

Certified Professional Midwives care for clients and their babies during pregnancy, labor, birth, and up to 6 weeks postpartum. They attend low-risk vaginal births in a community setting from about 37 to 42 weeks gestation. This includes home and birth center births. Midwives can be reached for non-emergency contact by email, text, and phone during normal business hours M-F 9AM-6PM. When “on call” from about 37-42 weeks gestation of your pregnancy, and up to 1 week postpartum, midwives can be reached by phone 24 hours a day, 7 days a week. Please reserve after hours calls for emergencies and births only. If the primary midwife cannot be reached, please contact another midwife in the practice. Life & Love Midwifery also provides family planning, well-person care, routine lab work, newborn tests and screenings, ultrasounds, childbirth education, partner and sibling classes, lactation services, and birth pool rental.

Prenatal Care (During Pregnancy):

At each visit the gestational parent will be assessed for health including blood pressure, pulse, nutrition, activity, rest, and discomforts. Baby will also be assessed at each appointment for growth, heart rate, movements, and position. Some

visits will include other testing such as routine lab work, ultrasounds, urine culture, glucose testing, and others as indicated.

- Initial visit with complete physical exam and medical history (1.5-2hrs)
- Monthly visits from onset of care to 30wks gestation (1hr each)
- Bi-weekly visits from 30wks to 36wks gestation (1hr each)
- Weekly visits from 36wks gestation to birth (1hr each)

Intrapartum Care and Immediate Postpartum (During Labor and Right After Birth):

Midwives are responsible for monitoring the health of you and your baby and recommending transport to a local hospital if any emergency arises. During labor and right after birth they will do the following:

- Vital signs on parent and baby at regular intervals (Blood Pressure, Pulse, Temp., Fetal Heart Tones, position of baby)
- Comfort measures to help cope with discomforts (physical and emotional support)
- Monitor for any complications that may arise
- Monitor transition of baby to life outside the uterus (assist with breathing if necessary)
- Ensure delivery of placenta and monitor bleeding
- Check for tears and repair if needed
- Cut the cord after baby has all its blood from the placenta
- Offer Vitamin K and eye ointment
- Make sure that you can urinate and that you get something to eat and drink
- Make sure baby has been fed at least once
- Stay with you for 2-3hrs after the birth or until you and baby are both stable

Postpartum and Newborn Care:

These visits ensure the longer-term well-being of the parent and baby.

- Visits are 45min-1hr and typically happen at 24-48 hrs., 3 days, 1-2wks, and 4-6wks. Additional visits if necessary.
- Parental assessments may include blood pressure, pulse, temp., uterine size, bleeding, pain or discomfort, bowel and bladder function, signs of infection, feeding, rest and activity, family adjustment, and emotional well-being.
- Newborn assessments may include heart rate, breathing, temp., weight, peeing and pooping, sleeping, and feeding patterns.
- Other discussions may include community resources, family planning, newborn screenings, and testing.

Referrals, Collaboration, and Transfer of Care

Sometimes situations or conditions arise in pregnancy and birth that require the care of a physician or nurse midwife. Currently in the state of Alabama CPM's may not care for those with twins, breech presentation at onset of labor, or vaginal birth after cesarean (VBAC). There are some medical conditions that may need to be monitored by a physician

throughout pregnancy and at times may require a consultation, referral, or transfer of care. These could include clotting disorders, high blood pressure, uncontrolled diabetes, heart, lung, or kidney disease, genetic or physical abnormalities, any other high-risk condition.

Scope of Practice and Limitations

Life & Love Midwifery offers out-of-hospital maternity services in accordance with state regulations found in the Alabama State Board of Midwifery Administrative Code Chapter 582-X-3 Practice of Licensed Midwifery. Services are provided to those experiencing a normal, uncomplicated, healthy pregnancy and who anticipate a normal vaginal birth of a healthy child. We are not medical providers. Midwives within this practice may attend low-risk births between about 37-42 weeks gestation.

Life & Love Midwifery midwives carry basic instruments, supplies, and equipment that may be useful during an out-of-hospital birth including:

- Stethoscope
- Doppler
- Blood pressure cuff
- Thermometer
- DeLee suctioning catheter
- Urinary catheter
- Various clamps and scissors
- Oxygen (bag and mask for baby, mask for client)
- Pitocin for excessive bleeding after birth
- IV supplies for excessive bleeding
- Lidocaine for numbing before suturing
- Suturing supplies
- Vitamin K and erythromycin for baby
- Essential oils and herbal remedies

Our midwives do not carry narcotic pain medication, cannot administer an epidural, do not carry drugs to induce or augment labor, cannot give blood transfusions. We do not offer continuous fetal monitoring, vacuum extraction, forceps, or cesarean delivery. If any of these things are wanted, or become necessary, the client will be transported to the hospital.

Safety and Emergency Care Planning

The midwives and students at Life & Love Midwifery are trained in CPR and neonatal resuscitation. Even with proper training and careful planning, sometimes emergencies arise. There is an individual emergency care plan developed with each client in case emergency transport is necessary. If possible, the lead midwife will travel with the client to continue care during transport.

Complications are rare, but if they occur would require immediate transport to the hospital, they include but are not limited to:

- Fetal distress
- Placental previa or abruption
- Uterine rupture
- Severe lacerations
- Retained placenta
- Prolapsed cord
- Excessive blood loss
- Congenital defects

- Unresolved shoulder dystocia

- Stillbirth

Accountability

Life & Love Midwifery midwives and students participate in regular peer review sessions. These meetings allow for discussion on particularly interesting or difficult cases. During these meetings it may be necessary to confidentially disclose some health information in the review process. These peer reviews ensure that midwives are continually learning and becoming better able to serve the community.

If you are not satisfied with your care, you may file a written complaint with our office. If your complaint is not addressed in a manner suiting you, you may contact the Alabama State Board of Midwifery at alsbm.org, or the North American Registry of Midwives at narm.org.

Client Responsibilities

As a client of Life & Love Midwifery you agree to work toward maintaining a healthy low-risk pregnancy by making the best choices about your health that you can. These should include:

- Sound nutrition and altering diet when needed
- Avoidance of harmful substances: tobacco, drugs, alcohol, environmental toxins, etc.
- Physical activity through safe, regular activities/exercise
- Education regarding good health

It is your responsibility to:

- Acquire knowledge about the risks and benefits of all your options
- Be open and honest with your midwife, sharing of relevant information regarding both physical and psychological status.
- Attend regular prenatal appointments and continue care with a physician for any medical needs
- Prepare yourself, your home, and family for the birth (physically and emotionally)
- Attain some knowledge of childbirth, breastfeeding, parenting, etc.
- Cooperate with the midwife and any other care providers during an emergency
- Arrange for a responsible caretaker for any older siblings present during the birth.
- Plan for Pediatric care after the birth
- Uphold your financial agreement
- Inform the midwife of any changes in your health and call immediately for any of the following:
 - Bleeding from the vagina
 - Sudden gush of fluid from the vagina or you think the bag of waters is leaking or has released
 - Meconium-stained fluid (brown, green, or black) leaking from the vagina

- Blurred vision, severe headache, dizziness, or feeling disoriented
- Increased or sudden swelling or puffiness in the hands, feet, ankles, or face
- Extreme nausea or vomiting, unable to keep fluids down
- Chills and fever over 100° Fahrenheit, not accompanied by an illness
- Any part of the baby (head, hand, foot, cord, etc.) appearing in the vagina
- Painful urination and/or burning when urinating
- Sharp pain in uterus; severe abdominal pain (that does not let up)
- Absence of fetal movement for 12 hours, from the time that strong movement is apparent
- Increased, unusual thirst with reduced amounts of urine (or if you do not urinate for more than half a day despite normal fluid intake)
- Regular contractions and think this might be labor

Calls are returned promptly, so if urgent, please call our alternate numbers or call again if you have not received a return call within 15 minutes. DO NOT USE EMAIL TO INFORM US OF ANY OF THESE CONDITIONS!

HIPAA Privacy and Security

The Midwives and students at Life & Love Midwifery will abide by all federal and local guidelines regarding the privacy and security of your personal and health information. (See Privacy Practices form)

Statement of Understanding

You are responsible for your choice of birth environment and care provider. You understand and assume all risks associated with an out-of-hospital birth attended by the midwives and students of Life & Love Midwifery and agree to not hold anyone else accountable or liable for your decisions or the outcomes of your pregnancy, birth, or postpartum recovery. You agree that you have weighed the benefits and risks and have had an opportunity to ask questions.

YOU HAVE READ, UNDERSTAND, AND AGREE TO THE ABOVE STATED MATERIAL CONTAINED HEREIN AS "INFORMED DISCLOSURE OF MIDWIFERY CARE."

Signature (Client)

Date

Printed Name (Client)

Received By Signature

Date

Received By Printed Name

References

Alabama State Board of Midwifery. (2022). Practice of licensed midwifery. <https://alsbm.org>.

Delaney, S. (2022). Writing the informed disclosure (Live conference). Midwives College of Utah.

Midwives Alliance of North America. (2020). Midwives model of care. <https://mana.org>.

Rusch, H. (2022). Informed Consent. Worth the Wait Midwifery.