

LICENSED MIDWIFE DISCLOSURE FORM

Client: _____ Date: _____

Licensed midwife: _____ Date: _____

SEC. 2.

*Section 2507 of the Business and Professions Code is amended to read:
2507.*

(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 a 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.

SEC. 3.

*Section 2508 of the Business and Professions Code is amended to read:
2508.*

(a) A licensed midwife shall disclose in oral and written form to a prospective client as part of a client care plan, and obtain informed consent for, all of the following:

(1) All of the provisions of Section 2507.

(2) The client is retaining a licensed midwife, not a certified nurse-midwife, and the licensed midwife is not supervised by a physician and surgeon.

(3) The licensed midwife's current licensure status and license number.

(4) The practice settings in which the licensed midwife practices.

(5) If the licensed midwife does not have liability coverage for the practice of midwifery, he or she shall disclose that fact. The licensed midwife shall disclose to the client that many physicians and surgeons do not have liability insurance coverage for services provided to someone having a planned out-of-hospital birth.

(6) The acknowledgment that if the client is advised to consult with a physician and surgeon, failure to do so may affect the client's legal rights in any professional negligence actions against a physician and surgeon, licensed health care professional, or hospital.

(7) There are conditions that are outside of 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.

(8) The specific arrangements for the referral of complications to a physician and surgeon for consultation. The licensed midwife shall not be required to identify a specific physician and surgeon.

(9) 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, and recommendations for preregistration at a hospital that has obstetric emergency services and is most likely to receive the transfer.

(10) If, during the course of care, the client is informed that she has or may have a condition indicating the need for a mandatory transfer, the licensed midwife shall initiate the transfer.

(11) The availability of the text of laws regulating licensed midwifery practices and the procedure for reporting complaints to the Medical Board of California, which may be found on the Medical Board of California's Internet Web site.

(12) Consultation with a physician and surgeon does not alone create a physician-patient relationship or any other relationship with the physician and surgeon. The informed consent shall specifically state that the licensed midwife and the consulting physician and surgeon are not employees, partners, associates, agents, or principals of one another. The licensed midwife shall inform the patient that he or she is independently licensed and practicing midwifery and in that regard is solely responsible for the services he or she provides.

(b) The disclosure and consent shall be signed by both the licensed midwife and the client and a copy of the disclosure and consent shall be placed in the client's medical record.

(c) The Medical Board of California may prescribe the form for the written disclosure and informed consent statement required to be used by a licensed midwife under this section.

SEC. 4.

*Section 2510 is added to the Business and Professions Code, to read:
2510.*

If a client is transferred to a hospital, the licensed midwife shall provide records, including prenatal records, and speak with the receiving physician and surgeon about labor up to the point of the transfer. The hospital shall report each transfer of a planned out-of-hospital birth to the Medical Board of California and the California Maternal Quality Care Collaborative using a standardized form developed by the board.

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 (attached to this waiver) have been disclosed to me, _____, as a client who is retaining the services of a licensed midwife.

2. I understand that I am retaining the services of _____, who is a licensed midwife, not a certified nurse midwife, and _____ is not supervised by a physician and surgeon.

3. I understand that the license status of _____ is current and unrestricted and his/her license number is _____.

4. I understand that _____ practices in out-of-hospital settings, including homes, birth centers and clinics and does not have hospital privileges.

5. I understand that _____ does/does not have liability coverage for the practice of midwifery. 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.

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.

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.

8. I understand that the specific arrangements for the referral of complications to a physician and surgeon for consultation are:

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:

_____ I also understand that the licensed midwife recommends that I preregister at a hospital that has obstetric emergency services and is the hospital I am most likely to transfer to if necessary.

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.

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 _____ and any physician and surgeon with whom he/she consults are not employees, partners, associates, agents, or principals of one another. I also understand that _____ is independently licensed and practicing midwifery, and in that regard is solely responsible for the services he/she provides.

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 Internet at 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 Web site.

13. I understand that _____ is not an attorney and is not qualified to provide advice on any rights or privileges that might be affected by the acknowledgements made herein. I understand that it is my responsibility to seek the advice of an attorney of my choice before executing this Disclosure Form.

Signature of client: _____ Date:

Signature of midwife: _____ Date:

Note: A copy of the signed Disclosure Form shall be placed in the client's medical record