

## **Disclosure Statement of Dove Charity Home Birth Services**

(Updated 10/11)

I am an apprentice trained direct entry midwife. I am not a registered nurse, certified nurse midwife, or physician. I am not licensed or certified by the State of Pennsylvania, Ohio or New York. I am certified through the association and the North American Registry of Midwives (NARM). I am a Certified Professional Midwife. I hold current certification in both adult and infant CPR as well as neonatal resuscitation

I have been attending births as a primary midwife since 2001 and have been blessed to be a part of over 130 homebirths. Prior to that time, I observed and/or assisted at over 100 home, clinic and hospital births. My transport rate is approximately 4% and my cesarean section rate is approximately 3%.

Although, I believe that every woman has the right to choose where and with whom she has her baby, my practice is limited to low risk pregnancies and births. Should your pregnancy fall out of the low risk category, I would have to consult with another professionals and maybe other arrangements may have to be made for the birth.

I expect parents to be well informed and take responsibility for reading and educating themselves. I expect you to consider the gravity of the risk you are taking, and be willing to take full responsibility for the outcome of your birth. I cannot offer you any guarantees other than I will do my best, with the knowledge I have, to provide you with a safe and rewarding birth experience.

Even with low risk births, complications can arise. Usually there is ample time to transport to the hospital, but occasionally we must deal with the complication at home. Some of the complications I have dealt with are fetal distress, prolonged labor, dehydration, meconium, tight nuchal cord, postpartum hemorrhage, surprise breech, shoulder dystocia, post partum depression and respiratory distress in the baby and surprise twins.

You are responsible for arranging your own obstetrical and pediatric back-up. If you cannot find private obstetrical back-up, and you end up transporting, we will go to the closest hospital. Cobra laws mandate that hospitals may not refuse emergency care to pregnant women or women in labor. Some hospitals have certified nurse midwives who take care of all walk-ins, while other hospitals call in the obstetrician on call. In either case, without private physician back-up, you will not know who will handle your birth ahead of time. We can not guarantee what type of reception you will receive.

My fee is to be fully paid by the time of the home visit, approximately 3-4 weeks before your due date. The fee covers services that are provided by me and/or my assistant, and include prenatal care, a prenatal home visit, labor and birth, and 2-4 postpartum visits. Outside lab work, ultrasounds, physician and/or certified nurse midwife consultations, travel fees, and some birth supplies are not included in my fee.

If I am notified when your labor begins and kept in touch with during your labor, it is very rare that I would miss your birth. No refund will be given.

In the event of transport to the hospital, I will make every effort to stay with you. With some hospitals, though, this is an impossibility. Regardless of whether I can remain with you or not, no refund will be made.

My main goal is a safe birth for both you and your baby. I look forward to a rich and rewarding experience sharing this time with you.

In Pennsylvania assisting a woman in child birth and in both prenatal and postnatal care is a legal by judicial interpretation, by statutory inference<sup>1</sup>. The only law regarding midwifery refers to Certified Nurse Midwifery. In fact in the PA TOC Bulletin<sup>2</sup> it says that **PA state law's definition of a midwife is one who licensed by the board by first becoming a registered nursing then becoming a Certified Nurse Midwife (CNM)**. Therefore I refer to myself as a traditional birth attendant and I encourage you to do so as well. Even though, **midwife and midwifery** has traditionally been referred to one who assists another in childbirth.

*Random House Webster's Unabridged Dictionary* defines it as follows.

**mid·wife**

1. a person trained to assist women in childbirth.
2. a person or thing that produces or aids in producing something new or different.
3. to assist in the birth of (a baby).

*PA TOC agrees with Taber's Medical Dictionary* in defining **midwifery** as the practice of caring for women and neonate in normal antepartum, intrapartum and postpartum to the 28<sup>th</sup> day of age in the neonate.

I have been trained by different midwifery educational programs in both theory and practical care of women in normal and emergency care. It is important for you to know what my limitations are.<sup>3</sup>

1. I assist only with normal childbirth except in an emergency situation that poses an immediate threat to the life of the mother or newborn.
2. I am trained in the emergency care of mom and infant during labor and post partum for hemorrhage, tears and resuscitation.
3. I educate my clients during prenatal, postpartum, and newborn care and childbirth education.
4. I advise clients to seek medical care if they develop signs or symptoms of a complication.
5. I have unofficial back-up by a local physician and midwives for referring clients who have complications that occur before, during or after labor, childbirth and for the newborn.
6. I do not use forceps or surgical instruments for any procedure other than cutting the umbilical cord or providing emergency first aid during delivery and postpartum.
7. I do not remove the placenta by invasive techniques.
8. I do not advance or retard labor or delivery by using medicines or mechanical devices.
9. I do not administer a prescription drug during pregnancy except under the supervision of a physician licensed by the State of Pennsylvania.
10. I do not offer to diagnose or treat any disease or condition other than normal pregnancy discomforts, However, if during the course of a prenatal examination, I encounter unusual findings, I will advise you. If you desire advice, diagnosis or treatment for those findings, I will recommend that you seek the services of a health care provider who specializes in that area.
11. I do not knowingly or intentionally falsify or make false statements on a birth certificate application.
12. The law also requires:
  - a. Eye prophylaxis for infant to prevent blindness due to infection
  - b. Newborn screening
  - c. Serology blood test during pregnancy
  - d. Registrations of both births and deaths

I have read and the above regulations and understand it's content.

---

Signed

---

Dated

---

<sup>1</sup><http://www.mana.org/statechart.html>

<sup>2</sup><http://www.patoc.gov/> ( a copy of the PA TOC regarding midwifery is available upon request)

<sup>3</sup> A copy of protocols, certifications, references and signatures from my educators are available upon request