



Board of Certified Direct-Entry Midwives Meeting - September 24, 2025

Alaska Division of Corporations, Business and Professional Licensing
Videoconference
2025-09-24 09:00 - 12:00 AKDT

Table of Contents

1. Call to Order

A. Roll Call

Board Members:

- Holly Steiner, RN, CDM, CPM, Chair
- Bethel Belisle, CDM, CPM
- Darcy Lucey, APRN, CNM
- Lori Lindsay, MD
- Stacia Miller

B. Declarations of Conflicts of Interest.....4

Ethics Act Procedures for Boards & Commissions - Alaska Department of Law.pdf...4

C. Accept Agenda.....10

MID Statutes and Regulations - December 2023

MID - Agenda - 09-24-2025 - updated.pdf.....10

2. Board Ethics and Investigative Training

3. Investigative Report

4. Public Comment

5. Board Administrative Business.....12

General Motion Worksheet.pdf.....12

A. Board Project - Applications by Credentials

States Comparison by Credentials

- Determine what information will be used in comparison
- Determine how often analysis will be completed
- Determine who is going to make the comparison. Divide and conquer – each board member take certain states

Applicant has the right for this topic to be discussed on the record.

B. Board Position Statement.....13

12 AAC 14.530 and 14.560.pdf.....	13
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C. SCRA Applications

Discuss delegating that authority to the division if a midwife (or apprentice) were to apply under Federal Servicemembers Civil Relief Act (SCRA).

I motion that licenses applied for under the Federal Servicemembers Civil Relief Act's (or "SCRA") licensure portability laws be reviewed, approved, and issued by the division, rather than by the board, in order to comply with federal law requiring expediency and due to the fact that the board's authority and requirement to approve and issue licenses is under Alaska Statute Title 8, rather than federal law. Once licensed is issued pursuant to the SCRA, these licensees will be subject to the requirements of Title 8 of Alaska Statutes and subject to the board's authority, same as all other Alaska professional licensees under the board's jurisdiction.

D. AO 360.....	15
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AO 360.pdf.....	15
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E. Set Next Meeting Date(s)

Sec. 08.65.020. MEETINGS. The board shall meet twice annually and may hold special meetings at the call of the chair or on the written notice of two board members.

6. Tabled Audits

A. Mary Yanagawa - 104945 - 2025 random audit.....	19
---	-----------

MID - Mary Yanagawa - 104945 - 2025 Audit.pdf.....	19
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B. Rachel Pugh - 126725 - 2025 random audit.....	27
---	-----------

MID - Rachel Pugh - 126725 - 2025 Audit.pdf.....	27
--	----

7. Exemption Request AO 358 - Regulations Project

Adopt a Regulations Project to amend/eliminate regulations to align with current standards/procedures. Reduce redundancies.

- 14.110 - amend (7) supervised clinical experience per NARM certification requirements; (c) ??
- 14.210 - Supervised Clinical Experience Requirements - amend/eliminate as met by NARM certification?
- 14.300 Examinations - people do not apply for board approval prior to taking the NARM certification
- 12 AAC 14.560 (a)(2) "provides documentation" acceptable to the board of having acquired the training and skills necessary to safely perform them - administration of medications as specified in 12 AAC 14.570 - Documentation of Pharmaceutical Knowledge - form #08-4215e.

Revise application once regulations adopted

8. Documentation of Pharmaceutical Knowledge - form #08-4215e.....	35
---	-----------

Board discussion on requirement of form #8-4215e and possible content changes.

12 AAC 14.110 14.560 and 14.570.pdf.....	35
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9. Legislative Update

- Statutory bill introduction - HB95
- Sponsor - Representative Allard

10. Next Steps

11. Adjourn



ETHICS ACT PROCEDURES FOR BOARDS & COMMISSIONS

All board and commission members and staff should be familiar with the Executive Branch Ethics Act procedures outlined below.

Who Is My Designated Ethics Supervisor (DES)?

Every board or commission subject to the Ethics Act¹ has several ethics supervisors designated by statute.

- The chair serves as DES for board or commission members.
- The chair serves as DES for the executive director.
- The executive director serves as DES for the staff.
- The governor is the DES for a chair.²

What Do I Have To Disclose?

The Ethics Act requires members of boards and commissions to disclose:

- Any matter that is a potential conflict of interest with actions that the member may take when serving on the board or commission.
- Any circumstance that may result in a violation of the Ethics Act.
- Any personal or financial interest (or that of an immediate family member) in a state grant, contract, lease or loan that is awarded or administered by the member's board or commission.
- The receipt of certain gifts.

The executive director of the board or commission and its staff, as state employees, must also disclose:

- Compensated outside employment or services.
- Volunteer service, if any compensation, including travel and meals, is paid or there is a potential conflict with state duties.
- For more information regarding the types of matters that may result in violations of the Ethics Act, board or commission members should refer to the guide, *"Ethics Information for Members of Boards and Commissions."* The executive director and staff should refer to the guide, *"Ethics Information for Public Employees."* Both guides and disclosure forms may be found on the [Department of Law's ethics website](#).

How Do I Avoid Violations of the Ethics Act?

- Make timely disclosures!
- Follow required procedures!
- Provide all information necessary to a correct evaluation of the matter!³
- When in doubt, disclose and seek advice!
- Follow the advice of your DES!

What Are The Disclosure Procedures for Board and Commission Members?

The procedural requirements for disclosures by members are set out in AS 39.52.220 and 9 AAC 52.120. One goal of these provisions is to help members avoid violations of the Ethics Act. The procedures provide the opportunity for members to seek review of matters in advance of taking action to ensure that actions taken will be consistent with the Act.

Procedure for declaring actual or potential conflicts.

Members must declare potential conflicts and other matters that may violate the Ethics Act **on the public record and in writing to the chair**.

Disclosure on the public record. Members must identify actual and potential conflicts orally at the board or commission's public meeting **in advance** of participating in deliberations or taking any official action on the matter.

- A member must always declare a conflict and may choose to refrain from voting, deliberations or other participation regarding a matter.⁴
- If a member is uncertain whether participation would result in a violation of the Act, the member should disclose the circumstances and seek a determination from the chair.

Disclosure in writing at a public meeting. In addition to an oral disclosure at a board or commission meeting, members' disclosures must be made in writing.

- If the meeting is recorded, a tape or transcript of the meeting is preserved **and** there is a method for identifying the declaration in the record, an oral disclosure may serve as the written disclosure.
- Alternatively, the member must note the disclosure on the Notice of Potential Violation disclosure form and the chair must record the determination.

Confidential disclosure in advance of public meeting. Potential conflicts may be partially addressed in advance of a board or commission's public meeting based on the published meeting agenda or other board or commission activity.

- A member identifying a conflict or potential conflict submits a Notice of Potential Violation to the chair, as DES, in advance of the public meeting.
- This written disclosure is considered confidential.
- The chair may seek advice from the Attorney General.
- The chair makes a written determination, also confidential, whether the disclosed matter represents a conflict that will result in a violation of the Ethics Act if the member participates in official action addressing the matter. ⁵

- If so, the chair directs the member to refrain from participating in the matter that is the subject of the disclosure.
- An oral report of the notice of potential violation and the determination that the member must refrain from participating is put on the record at a public meeting.⁶

Determinations at the public meeting. When a potential conflict is declared by a member for the public record, the following procedure must be followed:

- The chair states his or her determination regarding whether the member may participate.
- Any member may then object to the chair's determination.
- If an objection is made, the members present, excluding the member who made the disclosure, vote on the matter.
- *Exception:* A chair's determination that is made consistent with advice provided by the Attorney General may not be overruled.
- If the chair, or the members by majority vote, determines that a violation will exist if the disclosing member continues to participate, the member must refrain from voting, deliberating or participating in the matter.⁷

If the chair identifies a potential conflict, the same procedures are followed. If possible, the chair should forward a confidential written notice of potential violation to the Office of the Governor for a determination in advance of the board or commission meeting. If the declaration is first made at the public meeting during which the matter will be addressed, the members present, except for the chair, vote on the matter. If a majority determines that a violation of the Ethics Act will occur if the chair continues to participate, the chair shall refrain from voting, deliberating or participating in the matter. A written disclosure or copy of the public record regarding the oral disclosure should be forwarded to the Office of the Governor for review by the chair's DES.

Procedures for Other Member Disclosures

A member's interest in a state grant, contract, lease or loan and receipt of gifts are disclosed by filling out the appropriate disclosure form and submitting the form to the chair for approval. The disclosure forms are found on the [Department of Law's ethics website](#).

What Are The Disclosure Procedures for Executive Directors and Staff?

Ethics disclosures of the executive director or staff are made in writing to the appropriate DES (chair for the executive director and the executive director for staff).

- Disclosure forms are found on the ethics website, noted above.

Notices of Potential Violations. Following receipt of a written notice of potential violation, the DES investigates, if necessary, and makes a written determination whether a violation of the Ethics Act could exist or will occur. A DES may seek advice from the Attorney General. If feasible, the DES shall reassign duties to cure a potential violation or direct divestiture or removal by the employee of the personal or financial interests giving rise to the potential violation.

- These disclosures are not required to be made part of the public record.
- A copy of a determination is provided to the employee.

- Both the notice and determination are confidential.

Other Disclosures. The DES also reviews other ethics disclosures and either approves them or determines what action must be taken to avoid a violation of the Act. In addition to the disclosures of certain gifts and interests in the listed state matters, state employees must disclose all outside employment or services for compensation.

- The DES must provide a copy of an approved disclosure or other determination to the employee.

How Are Third Party Reports of Potential Violations or Complaints Handled?

Any person may report a potential violation of the Ethics Act by a board or commission member or its staff to the appropriate DES or file a complaint alleging actual violations with the Attorney General.

- Notices of potential violations and complaints must be submitted **in writing** and **under oath**.
- Notices of potential violations are investigated by the appropriate DES who makes a written determination whether a violation may exist.⁸
- Complaints are addressed by the Attorney General under separate procedures outlined in the Ethics Act.
- **These matters are confidential**, unless the subject waives confidentiality or the matter results in a public accusation.

What Are The Procedures for Quarterly Reports?

Designated ethics supervisors must submit copies of notices of potential violations received and the corresponding determinations to the Attorney General for review by the state ethics attorney as part of the quarterly report required by the Ethics Act.

- Reports are due in April, July, October and January for the preceding quarter.
- A sample report may be found on the Department of Law's ethics website.
- An executive director may file a quarterly report on behalf of the chair and combine it with his or her own report.
- If a board or commission does not meet during a quarter and there is no other reportable activity, the DES advises the Department of Law Ethics Attorney by e-mail at ethicsreporting@alaska.gov and no other report is required.

If the state ethics attorney disagrees with a reported determination, the attorney will advise the DES of that finding. If the ethics attorney finds that there was a violation, the member who committed the violation is not liable if he or she fully disclosed all relevant facts reasonably necessary to the ethics supervisor's or commission's determination and acted consistent with the determination.

How Does A DES or Board or Commission Get Ethics Advice?

A DES or board or commission may make a **written request** to the Attorney General for an opinion regarding the application of the Ethics Act. In practice, the Attorney General, through the state ethics attorney, also provides **advice by phone or e-mail** to designated ethics supervisors, especially when time constraints prevent the preparation of timely written opinions.

- A request for advice and the advisory opinion are confidential.
- The ethics attorney endeavors to provide prompt assistance, although that may not always be possible.
- The DES must make his or her determination addressing the potential violation based on the opinion provided.

It is the obligation of each board or commission member, as well as the staff, to ensure that the public's business is conducted in a manner that is consistent with the standards set out in the Ethics Act. We hope this summary assists you in ensuring that your obligations are met.

¹ The Act covers a board, commission, authority, or board of directors of a public or quasi-public corporation, established by statute in the executive branch of state government.

² The governor has delegated the DES responsibility to Cheryl Lowenstein, Administrative Director of the Office of the Governor.

³ You may supplement the disclosure form with other written explanation as necessary. Your signature on a disclosure certifies that, to the best of your knowledge, the statements made are true, correct and complete. False statements are punishable.

⁴ In most, but not all, situations, refraining from participation ensures that a violation of the Ethics Act does not occur. Abstention does not cure a conflict with respect to a significant direct personal or financial interest in a state grant, contract, lease or loan because the Ethics Act prohibition applies whether or not the public officer actually takes official action.

⁵ The chair must give a copy of the written determination to the disclosing member. There is a determination form available on the Department of Law's ethics web page. The ethics supervisor may also write a separate memorandum.

⁶ In this manner, a member's detailed personal and financial information may be protected from public disclosure.

⁷ When a matter of particular sensitivity is raised and the ramifications of continuing without an advisory opinion from the Attorney General may affect the validity of the board or commission's action, the members should consider tabling the matter so that an opinion may be obtained.

⁸ The DES provides a copy of the notice to the employee who is the subject of the notice and may seek input from the employee, his or her supervisor and others. The DES may seek advice from the Attorney General. A copy of the DES' written determination is provided to the subject employee and the complaining party. The DES submits a copy of both the notice and the determination to the Attorney General for review as part of the DES' quarterly report. If feasible, the DES shall reassign duties to cure a potential violation or direct divestiture or removal by the employee of the personal or financial interests giving rise to the potential violation.

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Board of Certified Direct-Entry Midwives Meeting September 24, 2025

Alaska Division of Corporations, Business and Professional Licensing
Wednesday, September 24, 2025 at 9:00 AM AKDT to 12:00 PM AKDT
Videoconference

Meeting Details: https://us02web.zoom.us/meeting/register/EeTOiQNnSjCosUp70-U_VQ

Additional Meeting Details: Meeting registration required

Agenda

1. Call to Order

9:00 AM

A. Roll Call

Board Members:

- Holly Steiner, RN, CDM, CPM, Chair
- Bethel Belisle, CDM, CPM
- Darcy Lucey, APRN, CNM
- Lori Lindsay, MD
- Stacia Miller

B. Declarations of Conflicts of Interest

C. Accept Agenda

[MID Statutes and Regulations - December 2023](#)

2. Board Ethics and Investigative Training

9:10 AM

Presenter: Sara Chambers

3. Investigative Report

10:00 AM

4. Public Comment

10:05 AM

5. Board Administrative Business

A. Board Project - Applications by Credentials

10:15 AM

States Comparison by Credentials

B. Board Position Statement

10:30 AM

Discussion on use of [Cook® Cervical Ripening Balloon with Stylet](#) by Midwives

C. SCRA Applications

10:40 AM

Discuss delegating that authority to the division if a midwife (or apprentice) were to apply under Federal Servicemembers Civil Relief Act (SCRA).

D. AO 360

10:55 AM

E. Set Next Meeting Date(s)

11:00 AM

Sec. 08.65.020. MEETINGS. The board shall meet twice annually and may hold special meetings at the call of the chair or on the written notice of two board members.

- 6. Tabled Audits** **11:05 AM**
- A. Mary Yanagawa - 104945 - 2025 random audit**
 - B. Rachel Pugh - 126725 - 2025 random audit**
- 7. Exemption Request AO 358 - Regulations Project** **11:20 AM**
- Adopt a Regulations Project to amend/eliminate regulations to align with current standards/procedures. Reduce redundancies.
- 8. Documentation of Pharmaceutical Knowledge - form #08-4215e** **11:35 AM**
- Board discussion on requirement of form #8-4215e and possible content changes.
- 9. Legislative Update** **11:50 AM**
- Statutory bill introduction - HB95
 - Sponsor - Representative Allard
- 10. Next Steps** **11:55 AM**
- 11. Adjourn** **12:00 PM**

[illegible]

12 AAC 14.530. PROHIBITED PRACTICES. A certified direct-entry midwife may not

- (1) administer prescription pharmacological agents intended to induce or augment labor;
- (2) administer prescription pharmacological agents to provide pain management;
- (3) use vacuum extractors or forceps;
- (4) prescribe medications;
- (5) provide out-of-hospital delivery services to a woman who has had a vertical incision cesarean section;
- (6) perform surgical procedures, except episiotomy, including cesarean sections, abortions, and circumcisions; or
- (7) knowingly accept responsibility for prenatal or intrapartum care of a client with any of the following diagnosed risk factors:
 - (A) chronic and significant maternal cardiac, pulmonary, renal, or hepatic disease;
 - (B) malignant disease in an active phase;
 - (C) significant hematological disorders or coagulopathies, or pulmonary embolism;
 - (D) insulin-requiring diabetes mellitus;
 - (E) known maternal congenital abnormalities affecting childbirth;
 - (F) confirmed isoimmunization, Rh disease with positive titer;
 - (G) active tuberculosis;
 - (H) active syphilis or gonorrhea;
 - (I) active genital herpes infection two weeks prior to labor or in labor;
 - (J) pelvic or uterine abnormalities affecting normal vaginal births, including tumors and malformations;
 - (K) untreated alcoholism or alcohol abuse;
 - (L) untreated drug addiction or substance abuse;
 - (M) confirmed AIDS status;
 - (N) uncontrolled current serious psychiatric illness; or
 - (O) social or familial conditions unsatisfactory for out-of-hospital maternity care services.

Authority: AS 08.65.030, AS 08.65.140, AS 08.65.190

12 AAC 14.560. PERMITTED PRACTICES. (a) The following practices may be performed by a certified direct-entry midwife who, in accordance with (c) of this section, provides documentation acceptable to the board of having acquired the training and skills necessary to safely perform them:

- (1) catheterization of the urinary bladder;
- (2) administration of medications as specified in 12 AAC 14.570;
- (3) venipuncture;
- (4) capillary blood sampling;
- (5) suturing;
- (6) emergency measures as specified in 12 AAC 14.600;
- (7) intravenous therapy; or
- (8) an episiotomy.

(b) Before performing prenatal care, vaginal delivery, and postpartum care for a client with a previous cesarean section, a certified direct-entry midwife must provide evidence of at least six hours of training and education in performing these practices for a post-cesarean client.

(c) The board will notify the certified direct-entry midwife that documentation submitted under this section is acceptable to the board of competence in these practices. A certified direct-entry midwife may not perform the practices set out in (a) and (b) of this section until notification of acceptance has been provided to the certified direct entry midwife by the board.

Authority: AS 08.65.030

Administrative Order No. 360

I, Mike Dunleavy, Governor of the State of Alaska, under the authority of Article III, Sections 1, 23, and 24 of the Constitution of the State of Alaska, hereby rescind Administrative Order 157 (Directives regarding Administrative Regulations in order to accomplish objectives) and Administrative Order 266 (establishing regulatory efficiency guidelines) and replace them with Administrative Order 360, the purpose of which is to improve the quality, transparency, and efficiency of the State's regulatory environment.

BACKGROUND AND PURPOSE

The State of Alaska is committed to growing its economic base, increasing its gross domestic product ("GDP"), and ensuring Alaskans have the freedom to do business, innovate, and pursue opportunities while complying with state and federal laws. Regulations are essential for interpreting and implementing these laws. However, the state's regulatory system has expanded over time, often adding layers of requirements without considering the burden imposed on Alaska's citizens and businesses. Alaska must be competitive on the world stage – including its regulatory framework – to attract investment and grow its economic base.

The public is best served when regulations are up-to-date, clearly written, account for impact on individual Alaskans and those doing business in the state and allow state agencies to facilitate implementation of laws in the most reasonable and cost-effective manner.

In light of the steady expansion of state regulatory requirements, I am announcing a statewide review of all existing regulations, guidance documents [1], and materials incorporated by reference to reduce unnecessary burdens on Alaska's citizens and businesses. I am also directing that all current guidance documents be published on the Alaska Online Public Notice System to ensure transparency and accountability.

[1] The term "guidance document" in this Order refers to documentation other than regulations produced by an agency often referred to as guidance documents, policies, interpretive bulletins, and the like.

GOALS

This Order is issued to achieve the following goals:

- Promote growth and investment in Alaska by reducing administrative and economic burdens associated with regulatory compliance, including removing barriers, finding solutions, and identifying alternative pathways.

- Streamline permitting processes and improve coordination and efficiency within all permitting departments, including the Department of Natural Resources (“DNR”), the Department of Environmental Conservation (“DEC”), and the Department of Fish and Game (“DFG”).
- Ensure boards and commissions adjust regulatory structures as necessary to maintain critical consumer protection while eliminating unnecessary barriers to entry for new professionals.
- Engage stakeholders early and continuously in the regulatory development and reform process.
- Ensure all regulations are clearly written, legally sound, and supported by a demonstrated need.
- Regularly evaluate existing regulations for effectiveness, redundancy, clarity, and impact.
- Reduce the regulatory burden on all Alaskans.

APPLICABILITY

This Order applies to all executive branch agencies, including departments, boards, commissions, and public corporations (hereafter referred to as “agencies”).

RESPONSIBILITY FOR IMPLEMENTATION

The following agencies (“implementing agencies”) are responsible for ensuring agency compliance with this Order:

- - **The Office of the Governor.** This office will provide oversight and ensure interagency cooperation.
 - **The Department of Law.** This department will coordinate the implementation of and ensure compliance with this Order pursuant to its role under AS 44.62. The Department of Law will provide the training and documentation to be used in implementing this Order.

ORDER

REGULATORY REDUCTION

Each agency shall:

Review existing regulations, guidance documents, and materials incorporated by reference to identify provisions that are outdated, redundant, or unclear.

Develop proposals for the revision, repeal, or streamlining of the regulations, guidance documents, and materials incorporated by reference identified above.

Reduce the number of regulatory requirements by 15 percent by December 31, 2026, and 25 percent (cumulative) by December 31, 2027.

AGENCY REGULATORY LIAISON

The **commissioner of each state department** shall designate an **Agency Regulatory Liaison** (“ARL”) to oversee regulatory reform for agencies housed within their department. Commissioners may designate more than one ARL when approved to do so by the Office of the Governor.

Each department’s ARL shall submit a quarterly progress report to the Office of the Governor, with copies to the Department of Law.

STAKEHOLDER AND PUBLIC ENGAGEMENT

Stakeholder feedback is essential and required at all stages of regulatory reform. Accordingly, each agency shall:

Solicit written and oral input from the public, affected industries, and community organizations regarding which regulations are the most burdensome and should be prioritized for reform, and how the agency’s regulatory system could be reorganized or simplified.

Document and publish stakeholder and public feedback and agency responses.

PERMITTING REFORM

To improve the efficiency and responsiveness of Alaska’s permitting systems, and to support responsible resource and economic development while protecting environmental and public interests, DNR, DEC, and DFG shall focus their initial regulatory reform efforts on permitting process reform. Accordingly, DNR, DEC, and DFG shall:

Review and revise permitting procedures to eliminate unnecessary steps, reduce duplicative reviews, simplify application requirements, streamline internal workflows, and clarify interagency roles to reduce inefficiencies and delays.

Adopt, in regulation, clear timelines and deadlines for permit application processing, review of milestones, and final decision making, including provisions for automatic approval if deadlines are not met.

Ensure transparent processes by making permit application statuses, timelines, and decision rationales available to applicants and the public, to the extent allowable by law.

Promote predictability in decision-making by applying regulatory standards consistently.

Leverage technology, such as artificial intelligence (“AI”), to support digitization, automation, and public access to permitting information.

GUIDANCE DOCUMENTS

Agencies may not utilize or issue guidance documents unless the Department of Law has reviewed the documents and verified the documents (or portions thereof) are not required to be promulgated as a regulation.

Agencies shall post all guidance documents on the Alaska Online Public Notice System.

STATE UNIFIED REGULATORY PLAN

Annually, all agencies shall submit to the Office of the Governor a projected regulatory plan that lists all anticipated rulemaking actions during the subsequent state fiscal year. The Office of the Governor shall approve individual agency plans. The Department of Law shall compile the approved agency plans into a single State Unified Regulatory Plan and post the plan on the Alaska Online Public Notice System.

DURATION

This Administrative Order takes effect immediately and remains in effect until revoked.

DATED this 4th day of August 2025.

12 AAC 14.560. PERMITTED PRACTICES. (a) The following practices may be performed by a certified direct-entry midwife who, in accordance with (c) of this section, provides documentation acceptable to the board of having acquired the training and skills necessary to safely perform them:

- (1) catheterization of the urinary bladder;
- (2) administration of medications as specified in 12 AAC 14.570;
- (3) venipuncture;
- (4) capillary blood sampling;
- (5) suturing;
- (6) emergency measures as specified in 12 AAC 14.600;
- (7) intravenous therapy; or
- (8) an episiotomy.

(b) Before performing prenatal care, vaginal delivery, and postpartum care for a client with a previous cesarean section, a certified direct-entry midwife must provide evidence of at least six hours of training and education in performing these practices for a post-cesarean client.

(c) The board will notify the certified direct-entry midwife that documentation submitted under this section is acceptable to the board of competence in these practices. A certified direct-entry midwife may not perform the practices set out in (a) and (b) of this section until notification of acceptance has been provided to the certified direct entry midwife by the board.

Authority: AS 08.65.030

12 AAC 14.570. MEDICATIONS. A certified direct-entry midwife may not administer restricted drugs or medications except for the following, and only if the certified direct-entry midwife has documented the training and skills demonstrating competence to administer them as required in 12 AAC 14.560:

- (1) xylocaine hydrochloride, one or two percent, administered by infiltration, for the postpartum repair of tears, lacerations, and episiotomy;
- (2) cetacaine, applied topically, for the postpartum repair of tears, lacerations, and episiotomy;
- (3) vitamin K, administered by intramuscular injection, for the prevention of acute and late onset hemorrhagic disease of the infant;
- (4) Rh immune globulin, administered by intramuscular injection, for an unsensitized client with Rh negative type blood to prevent Rh disease;
- (5) eye prophylaxis as required by 7 AAC 27.111;
- (6) oxytocin, administered by intramuscular injection or intravenously after delivery of the neonate, for the prevention or treatment of postpartum hemorrhage;
- (7) medications for the control and treatment of postpartum hemorrhage, including uterotonic agents, oxytocin, methylergonovine, carboprost tromethamine, tranexamic acid, and misoprostol;
- (8) lactated ringers, plain or with dextrose five percent, or normal saline, up to 2,000 milliliters administered intravenously to a client who would benefit from hydration;
- (9) antibiotic intravenous therapy treatment for Group B Streptococci in accordance with the United States Department of Health and Human Services, Centers for Disease Control and Prevention's Prevention of Perinatal Group B Streptococcal Disease: Revised Guidelines from CDC, revised as of August 16, 2002 and adopted by reference, except that vancomycin may not be administered;
- (10) epinephrine for allergic reaction or anaphylactic shock;
- (11) diphenhydramine administered by intramuscular injection or intravenously for allergic reaction or anaphylactic shock;
- (12) an anti-diarrheal agent, including loperamide or diphenoxylate/atropine.

Authority: AS 08.65.030 and AS 08.65.190