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Chapter 14. Board of Certified Direct-Entry Midwives.

(Words in <u>boldface and underlined</u> indicate language being added; words [CAPITALIZED AND BRACKETED] indicate language being deleted. Complete new sections are not underlined.)

12 AAC 14.130(e) is amended to read:

(e) An apprentice direct-entry midwife shall submit written notice to the department within 30 days after any [ADDITION OR] change to the relationship with the apprenticeship program preceptor.

(Eff. 5/11/94, Register 130; am 12/26/2003, Register 168; am 8/19/2004, Register 171; am 8/19/2009, Register 191; am ___/____, Register ____)

Authority: AS 08.65.030 AS 08.65.090

12 AAC 14 is amended by adding a new section to read:

12 AAC 14.150. Scope of practice. (a) A certified direct-entry midwife shall consult with a physician, advanced nurse practitioner, advance practice registered nurse, or certified nurse midwife, who is licensed in this state, and may provide prenatal care and postpartum care, and with approval of the consultant, may provide intrapartum care for a woman who has or has a history of

- (1) isoimmunization, epilepsy, heart abnormality, herpes;
- (2) psychiatric illness;
- (3) a fetus with suspected or diagnosed congenital anomalies;
- (4) a chronic maternal medical condition;
- (5) is less than 16 years of age at the time of delivery;
- (6) well controlled gestational diabetes mellitus A1.

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- (b) A certified direct-entry midwife may provide co-management of prenatal and postpartum care and may assist a physician or certified nurse midwife during the intrapartum period and delivery of a woman who
 - (1) has a dichorionic diamniotic twin gestation;
 - (2) has a fetus of less than 37 weeks gestation;
 - (3) has a fetus of more than 42 weeks gestation by dates and examination;
 - (4) has a fetus in any presentation other than cephalic at the onset of labor;
 - (5) is a nulliparous woman in active labor with a ballotable presenting fetal part;
- (6) is a woman in active labor who has ruptured membranes and ballotable presenting fetal part;
- (7) has experienced the rupture of membranes greater than 24 hours before active labor;
 - (8) has had a previous cesarean delivery or other uterine surgery.
 - (c) A certified direct-entry midwife may not knowingly care for or deliver a woman who
 - (1) has a history of pulmonary embolism;
 - (2) has pre-existing diabetes or gestational diabetes mellitus A2
 - (3) has pre-existing or chronic hypertension;
 - (4) has Rh disease with an affected fetus;
 - (5) has tuberculosis, active syphilis, or gonorrhea;
 - (6) has symptomatic heart or kidney disease;
 - (7) has current chronic substance abuse;
 - (8) has pre-eclampsia or eclampsia;
 - (9) has bleeding with evidence of placenta previa or placenta abruption;

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(10) has any condition determined by the board to be of high risk to the pregnant
woman, fetus or i	newborn. (Eff/, Register)
Authority: AS	S 08.65.050 AS 08.65.140
12 AAC 14.210(l	b)(2) is amended to read:
(2)) 10 labor and delivery observations that preceded any primary responsibility
for labor and deli	very, and may have been completed prior to the permit being issued;
(Eff. 2/18/94, Re	gister 129; am 4/16/2003, Register 166; am 12/26/2003, Register 168; am
8/19/2004, Regis	ter 170; am 4/29/2006, Register 178; am/, Register)
Authority: A	S 08.65.030 AS 08.65.050
12 AAC 14.400(l	b)(4) is amended to read:
(4)) submit copies that are current at the time of certificate renewal verifying
certification in	
	(A) the Basic Life Support for Health Care Providers Program (BLS);
<u>and</u>	
	(B) [INTRAVENOUS THERAPY TREATMENT FOR GROUP B
STREPTO	OCOCCI, FROM THE MIDWIVES' ASSOCIATION OF ALASKA (MAA),
OR FROM	M A PROGRAM APPROVED BY THE MIDWIFERY EDUCATION
ACCRED	DITATION COUNCIL (MEAC);
	(C) INTRAVENOUS THERAPY, FROM THE MIDWIVES'
ASSOCIA	ATION OF ALASKA (MAA), OR FROM A PROGRAM APPROVED BY
THE MID	OWIFERY EDUCATION ACCREDITATION COUNCIL (MEAC); AND

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(D)] the Neonatal Resuscitation Program (NRP) [(NPR)] from the American Academy of Pediatrics, or neonatal resuscitation approved by [FROM] the Midwives' Association of Alaska (MAA); and

(Eff. 5/11/94, Register 130; am 5/16/96, Register 138; am 3/2/2003, Register 165; am 5/2/2004, Register 170; am 2/23/2007, Register 181; am 8/19/2009, Register 191; am ___/____, Register ____)

Authority: AS 08.65.030

AS 08.65.080

12 AAC 14.500(b) is amended to read:

(b) At the initial prenatal visit, the certified direct-entry midwife shall recommend that the client undergo a physical examination as required in AS 08.65.140(1) [AS 08.65.140] to screen for health problems that could complicate the pregnancy or delivery and that includes a review of the laboratory studies required in (c) of this section. The certified direct-entry midwife shall obtain a signed written consent from the client reflecting the client's informed choice regarding the recommended physical examination and retain the consent in the client's record.

12 AAC 14.500(f) is amended to read:

(f) The certified direct-entry midwife shall comply with **AS 08.65.140(2)** [AS 08.65.140(b)] in obtaining a signed informed consent before the onset of labor [FOR HOME DELIVERY].

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12 AAC 14.500(i) is amended to read:
(i) If, following the consultation set out in (h) of this section, the physician recommends
referral for immediate medical care the certified direct-entry midwife shall refer the client for
immediate medical care. A referral for immediate medical care does not preclude the possibility
of an out of hospital [A HOME] delivery if, following the referral, the client does not have any
of the conditions set out in <u>AS 08.65.140(4) and 12 AAC 14.150</u> [AS 08.65.140(d)].
(Eff. 5/11/94, Register 130; am 5/2/2004, Register 170; am 10/18/2007, Register 184; am
3/2/2011, Register 197; am 8/10/2011, Register 199; am/, Register)
Authority: AS 08.65.030 AS 08.65.140 AS 08.65.190
12 AAC 14.510(d) is amended to read:
(d) A consultation or referral as required in (c) of this section does not preclude the
possibility of an out of hospital [A HOME] delivery if, following the consultation with a
physician or referral for medical care, the client does not have any of the conditions set out in
AS 08.65.140(4) and 12 AAC 14.150 [AS 08.65.140(d)].
(Eff. 5/11/94, Register 130; am 5/2/2004, Register 170; am 10/18/2007, Register 184; am
3/2/2011, Register 197; am/, Register)
Authority: AS 08.65.030 AS 08.65.140 AS 08.65.190
12 AAC 14.560(a) is amended by adding a new paragraph to read:
(10) perform an episiotomy.
(Eff. 5/11/94, Register 130; am 5/2/2004, Register 170; am/, Register)
Authority: AS 08.65.030

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Publisher: Please move the connector "and" from the end of 12 AAC 14.560(a)(8) to the end of
(a)(9).
12 AAC 14.570(6) is amended to read:
(6) pitocin, administered by intramuscular injection or intravenously
[INTRAVENOUS DRIP], for the <u>prevention or treatment</u> [CONTROL] of postpartum
hemorrhage;
12 AAC 14.570(7) is amended to read:
(7) methergine, administered orally or by intramuscular injection, [IN AN
EMERGENCY SITUATION] for the prevention or treatment [CONTROL] of postpartum
hemorrhage [THAT WAS NOT CONTROLLED BY THE ADMINISTRATION OF PITOCIN];
12 AAC 14.570(8) is amended to read:
(8) lactated ringers, plain or with dextrose five percent, or normal saline, up to $\underline{2}$
<u>liters</u> [2,000 MILLILITERS] administrated intravenously to a client who would benefit from
hydration;
(Eff. 5/11/94, Register 130; am 5/2/2004, Register 170; am 10/18/2007, Register 184; am
3/2/2011, Register 197; am 6/29/2013, Register 206; am/, Register)
Authority: AS 08.65.030 AS 08.65.190
12 AAC 14.600 is amended to read:

12 AAC 14.600. Emergency practices. In addition to the practices permitted in

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AS 08.65.140	0(4), 12 AAC 14.150.	(AS 08.65.140(e) AND (f)] and 12 AAC 14.560, in an	
emergency a	certified direct-entry	midwife who has documented training and skills	
demonstrating	g competence as set of	out in 12 AAC 14.560 may attend or deliver a woman wh	<u>10se</u>
condition is	outside the scope of	practice in AS 08.65.140(4)	
	[(1) PERFORM A	N EPISIOTOMY; AND	
	(2) ADMINISTER	R PITOCIN, METHERGINE, EPINEPHRINE, AND	
DIPHENHYI	DRAMINE AS DESC	CRIBED IN 12 AAC 14.570(6), (7), (10) AND (11)]. (Eff.	•
5/11/94, Regi	ster 130; am 5/2/200	04, Register 170; am/, Register)	
Authority:	AS 08.65.030	AS 08.65.140 AS 08.65.190	
12 AAC 14.6	10 is readopted with	out change:	
12 AA	AC 14.610. Emergei	ncy transport plan.	
• • •			
(Eff. 5/11/94,	Register 130; readop	pt/, Register)	
Authority:	AS 08.65.030	[AS 08.65.140] AS 08.65.190	
12 AAC 14.9	00(b)(6) is amended	to read:	
	(6) provide comm	unication [RECORDS] to the board and division investiga	ıtive
staff, as reque	ested by the board or	division investigative staff; and	
12 AAC 14.9	00(c) is amended to 1	read:	
(c) A	certified direct-entry	y midwife shall submit to the board or, if an organization ha	as

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been designated under (a) of this section, to that organization the following information:
(1) a copy of the annual summary of primary births attended by [BIRTH FOR
EACH LABOR AND DELIVERY FOR WHICH] the certified direct-entry midwife, or
assisting births that the certified direct-entry midwife is documenting for purposes
of re-licensure, [HAD PRIMARY RESPONSIBILITY] during the 12-month period that
began on <u>January</u> [APRIL] 1 of the preceding year; the copy must be submitted on or
before May 1 of each year;
(2) all records required under 12 AAC 14.540 as requested by the board <u>or</u>
[THROUGH] the organization providing peer review [FOR CASES SELECTED UNDER (b)(2)
OF THIS SECTION]; and
(3) within $\underline{14}$ [10] days after the delivery or transfer of care, all records required
under 12 AAC 14.540 for any case in which a client for whom the certified direct-entry midwife
had primary responsibility <u>in this state</u>
(A) died;
(B) required emergency hospital transport;
(C) required intensive care within the first week after birth; or
(D) had any of the complications or conditions listed in AS 08.65.140(4)
and 12 AAC 14.150 [AS 08.65.140(d)(1) - (17)] if the mother was attended in active

(Eff. 5/16/96, Register 138; am 2/23/2007, Register 181; am ___/___, Register ____)

labor or the newborn was delivered by a certified direct-entry midwife [IN

Authority: AS 08.65.030 AS 08.65.110 **AS 08.65.140**

ACCORDANCE WITH AS 08.65.140(e) or (f)].