

Midwives' Association of Washington State

STATEMENT REGARDING THE PROVISION OF CARE TO NEWBORNS BY LICENSED MIDWIVES

It is the custom and practice of licensed midwives in Washington State to provide integrated, comprehensive care to mothers and their newborns **in keeping with RCW 18.50¹** which directs both the education of midwives as regards newborn assessment and care and mandates referral when there are significant deviations from normal. In addition, WAC 246.834 includes newborn ophthalmic ointment and Vitamin K in legend drugs for licensed midwives. RCW 18.50 has been in effect for 35 years regulating the practice of licensed midwifery in Washington State and predates insurance reimbursement to licensed midwives by nearly 20 years.

MAWS maintains that the customary **scope of care** of a newborn by a licensed midwife includes, but is not limited to, clinical assessment, treatment, education, support and referral in the postpartum period as described below.

Immediate newborn care in the home or birth center includes, but is not limited to:

1. Neonatal resuscitation per NRP guidelines
2. APGAR assessment
3. Stabilization and monitoring of the newborn for 2-6 hours postpartum
4. Early initiation and facilitation of breastfeeding
5. Complete physical examination
6. Administration of neonatal eye prophylaxis
7. Administration of Vitamin K
8. Licensed Midwives discuss universal hepatitis B vaccination during the prenatal period and refer for early pediatric care when parents opt to have their babies immunized in the first week of life. Licensed Midwives administer hepatitis B immunoglobulin and vaccine to neonates born to mothers who are hepatitis B carriers.
9. Education for parents regarding care and monitoring of the normal newborn

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<http://www.doh.wa.gov/LicensesPermitsandCertificates/ProfessionsNewReneworUpdate/Midwife/Laws.aspx>

10. Physician consultation, referral and/or transfer of care in the event of significant deviations from normal (MAWS, [Indications for Consultation and Transfer](#)²)

Subsequent newborn care includes, but is not limited to:

1. On-call availability for discussion, home or clinic visits to address parental concerns or questions
2. At least one home visit between 1 and 3 days postpartum to evaluate the newborn for jaundice (including obtaining a blood sample for serum bilirubin levels as necessary or as feasible), weight loss, adequate feeding and elimination patterns, perform the initial Washington Department of Health Newborn Screening, and consultation and/or referral to pediatric care with any significant deviation from normal
3. At least one clinic visit between 1 and 2 weeks postpartum to evaluate for jaundice, weight gain, adequate feeding and elimination patterns, perform the second Washington Department of Health Newborn Screening, and consult and/or refer to pediatric care with any significant deviation from normal
4. Licensed Midwives have recently gained access to equipment and training to provide newborn critical congenital heart defect screening, as well as newborn hearing screening. MAWS supports this expansion of services to home and birth center midwifery clients where it is available.

Parents are typically advised to establish care with a licensed pediatric care provider prior to the birth and to schedule an office visit at or before 2 weeks of age. It should be noted that it is not uncommon for pediatric care providers to entrust monitoring of the newborn to a licensed midwife who is known to them through the entire course of postpartum care and defer the initial pediatric assessment to 8 weeks of age in the absence of any significant deviation from normal.

Licensed Midwives typically provide comprehensive clinical assessment, treatment, education, support and referral for the mother through at least 6 weeks postpartum. This includes breastfeeding support, newborn weight gain assessment and mother/infant bonding, all of which have relevance to the health and wellbeing of the newborn.

² <http://washingtonmidwives.org/for-hcprofessionals/indications-consultation2.html>
and <http://washingtonmidwives.org/documents/MAWS-OOH-transport-policy0211.pdf>

The clinical benefits of the extensive care provided by licensed midwives include exemplary breastfeeding rates, early detection and intervention for newborn jaundice, failure to thrive, congenital anomalies and maternal mood disorders.

The cost benefits of integrating the midwifery model of care into the maternity care system in Washington State have been demonstrated by the Department of Social and Health Services making Washington State a leader in integrated quality and cost effective maternity care³.

³ [http://washingtonmidwives.org/documents/Midwifery Cost Study 10-31-07.pdf](http://washingtonmidwives.org/documents/Midwifery%20Cost%20Study%2010-31-07.pdf)