

Byron Mallott
Lieutenant Governor
State Capitol
Juneau, Alaska 99811
907.465.3520 465.5400 Fax
WWW.LTGOV.ALASKA.GOV




530 West 7th Ave, Suite 1700
Anchorage, Alaska 99501
907.269.7460 269.0263
LT.GOVERNOR@ALASKA.GOV

**OFFICE OF THE LIEUTENANT GOVERNOR
ALASKA**

M E M O R A N D U M

TO: Jun Maiquis
Department of Commerce, Community and Economic Development

FROM: Scott Meriwether, Office of the Lieutenant Governor 
465.4081

DATE: August 11, 2016

RE: Filed Permanent Regulations: Board of Certified Direct-Entry Midwives

Regulations re: apprentice permits, scope of practice, supervised clinical experience, continuing education, prenatal care, intrapartum care, permitted practices, medications, emergency practices, emergency transport plans, and peer review (12 AAC 14.130(e); 12 AAC 14.150; 12 AAC 14.200(a)(3)(F)(i),(ii); 12 AAC 14.210(b)(2); 12 AAC 14.500(b),(f),(i)-(k); 12 AAC 14.510(d); 12 AAC 14.560(a)(2),(4),(10); 12 AAC 14.570(6)-(8),(12); 12 AAC 14.600; 12 AAC 14.610; 12 AAC 14.900(b)(6),(c))

Attorney General File:	JU2015200798 (Part 1)
Regulation Filed:	August 10, 2016
Effective Date:	September 9, 2016
Print:	219, October 2016

cc with enclosures: Linda Miller, Department of Law
Micaela Fowler, Department of Commerce, Community & Economic Development
Dianne Blumer, Administrative Regulation Review Committee
Judy Herndon, LexisNexis

ORDER CERTIFYING THE CHANGES TO REGULATIONS
OF THE BOARD OF CERTIFIED DIRECT-ENTRY MIDWIVES


The attached ten pages of regulations, dealing with review of an apprentice permit application, scope of practice, supervised clinical experience requirements, renewal requirements, approved continuing education programs, prenatal care, intrapartum care, permitted practices, medications, emergency practices, emergency transport plan, and peer review, are hereby certified to be a correct copy of the regulation changes that the Board of Certified Direct-Entry Midwives adopted at its February 25-26, 2016 meeting, under the authority of AS 08.65.030, AS 08.65.050, AS 08.65.080, AS 08.65.090, AS 08.65.110, AS 08.65.140, and AS 08.65.190 and after compliance with the Administrative Procedure Act (AS 44.62), specifically including notice under AS 44.62.190 and 44.62.200 and opportunity for public comment under AS 44.62.210.

This action is not expected to require an increased appropriation.

On the record, in considering public comments, the Board of Certified Direct-Entry Midwives paid special attention to the cost to private persons of the regulatory action being taken.

The regulation changes described in this order take effect on the 30th day after they have been filed by the lieutenant governor, as provided in AS 44.62.180.

DATE: 2/25/16
Anchorage, Alaska


Deborah Schneider, CDM, Chair
Board of Certified Direct-Entry Midwives

FILING CERTIFICATION

I, Byron Mallott, Lieutenant Governor for the State of Alaska, certify that on August 10, 2016 at 1030A.m., I filed the attached regulations according to the provisions of AS 44.62.040 – 44.62.120.


Byron Mallott, Lieutenant Governor

Effective: September 9, 2016
Register: 219, October 2016

Chapter 14. Board of Certified Direct-Entry Midwives.

12 AAC 14.130(e) is amended to read:

not later than (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 3/19/2014, Register 171;
am 3/19/2009, Register 191; am 9/9/2016, Register 219)

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~~, ^{ad} ~~advance~~ practice registered nurse, or certified
nurse midwife, who is licensed in this state, for a woman who

- (1) has a history of isoimmunization;
- (2) has a history of epilepsy or seizure disorder;
- (3) has a history of an asymptomatic heart abnormality;
- (4) has a current outbreak of genital herpes;
- (5) has a psychiatric illness that is stable and well-controlled; ^{or}
- (6) has well-controlled gestational diabetes mellitus (A1).

(b) A certified direct-entry midwife may not knowingly 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 active tuberculosis, syphilis, chlamydia, 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;
- (10) has a multiple gestation;
- (11) has a fetus of less than 37 weeks gestation;
- (12) has a fetus of more than 42 weeks gestation by dates and examination;
- (13) has a fetus in any presentation other than cephalic at the onset of labor;
- (14) is a nulliparous woman in active labor with a ballotable presenting fetal part;
- (15) is ~~a woman~~ ^{and} in active labor ^a who has ruptured membranes and ballotable presenting fetal part;
- (16) has experienced the rupture of membranes ^{earlier} ~~greater~~ than 24 hours before active labor;
- (17) has had a previous cesarean delivery or other uterine surgery;
- (18) has a fetus with an anticipated need for intervention due to diagnosed congenital anomalies;
- (19) has an active seizure disorder or is on seizure medication;
- (20) has severe psychiatric illness;
- (21) has first trimester primary outbreak of genital herpes or an active outbreak of genital herpes within two weeks of delivery; ^{or}
- (22) is less than 14 years of age; ^{or}
- ~~(23) has any condition determined by the board to be of high risk to the pregnant~~

~~woman, fetus or newborn:~~ (Eff. 9/9/2016 Register 219)

Authority: AS 08.65.030 AS 08.65.140

12 AAC 14.200(a)(3)(F)(i) and (ii) are amended to read:

(i) review of the side effects and administration of uterotonic

[PHARMACEUTICAL] agents [, SUCH AS EMERGENCY

ADMINISTRATION OF PITOCIN TO CONTROL POSTPARTUM

HEMORRHAGE]; and

12 AAC 14.200(a)(3)(F)(ii) is amended to read:

(ii) performing an [EMERGENCY] episiotomy;

(Eff. 2/18/94, Register 129; am 12/19/2001, Register 160; am 8/19/2004, Register 171; am

4/29/2006, Register 178; am 8/19/2009, Register 191; am 3/2/2011, Register 197; am

9/9/2016, Register 219)

Authority: AS 08.65.030 AS 08.65.050

12 AAC 14.210(b)(2) is amended to read:

(2) 10 labor and delivery observations that preceded any primary responsibility
for labor and delivery and may have been completed before the permit being issued;

(Eff. 2/18/94, Register 129; am 4/16/2003, Register 166; am 12/26/2003, Register 168; am

8/19/2004, Register 170; am 4/29/2006, Register 178; am 9/9/2016, Register 219)

Authority: AS 08.65.030 AS 08.65.050

~~12 AAC 14.400(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);

and

(B) [INTRAVENOUS THERAPY TREATMENT FOR GROUP B *STREPTOCOCCI*, FROM THE MIDWIVES' ASSOCIATION OF ALASKA (MAA), OR FROM A PROGRAM APPROVED BY THE MIDWIFERY EDUCATION ACCREDITATION COUNCIL (MEAC);

(C) INTRAVENOUS THERAPY, FROM THE MIDWIVES' ASSOCIATION OF ALASKA (MAA), OR FROM A PROGRAM APPROVED BY THE MIDWIFERY EDUCATION ACCREDITATION COUNCIL (MEAC); AND

(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~~

cc Publisher: Existing 12 AAC 14.400(b)(4) is unchanged.))

Withdrawn. ACCT 3/4/2016

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(c)(1)(J) is amended to read:~~

~~(J) cervical cytology as recommended by the American Society for~~

~~Colposcopy and Cervical Pathology (ASCCP) guidelines.~~

(((Publisher: Existing 12 AAC 14.500(c)(1)(J) is unchanged.)))

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].

12 AAC 14.500(i) is amended to read:

(i) If, following the consultation set out in (h) of this section, the consulting provider [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} out of hospital [A HOME] delivery if, following the referral, 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)].

12 AAC 14.500(j) is amended to read:

(j) During the third trimester, the certified direct-entry midwife shall ensure that the home-birth ~~home birth~~ client is adequately prepared for a home birth by discussing issues such as sanitation, facilities, adequate heat, availability of telephone and transportation, plans for emergency evacuation to a hospital, and the skills and equipment that the midwife will bring to the birth.

12 AAC 14.500(k) is amended to read:

(k) A certified direct-entry midwife shall make a home visit three to five weeks before the estimated date of confinement to assess the physical environment, to determine whether the home-birth ~~home birth~~ client has the necessary supplies, to prepare the family for the birth, and to instruct the family in correction of problems or deficiencies. (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 9/9/2016, Register 219)

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 out-of-hospital ~~an out-of-hospital~~ [A HOME] delivery if, following the consultation with the consulting provider [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 9/9/2016, Register 219)

Authority: AS 08.65.030 AS 08.65.140 AS 08.65.190

12 AAC 14.560(a)(2) is amended to read:

(2) administration of medications as specified in 12 AAC 14.570 [AND 12 AAC 14.600];

12 AAC 14.560(a)(4) is amended to read:

(4) artificial rupture of the amniotic membranes [MEMBRANE] if the fetal head is engaged [AT ZERO STATION OR LOWER] and the client is at least [PAST] five centimeters dilation;

(((Publisher: To reflect the board's addition of new 12 AAC 14.560(a)(10), please relocate the "and" connector to follow 12 AAC 14.560(a)(9) rather than 12 AAC 14.560(a)(8); and before the relocated "and" connector, change the period to a semicolon.)))

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 9/9/2016, Register 219)

Authority: AS 08.65.030

12 AAC 14.570(6) is amended to read:

(6) oxytocin [PITOCIN], administered by intramuscular injection or intravenously after delivery of the neonate [INTRAVENOUS DRIP], for the prevention or treatment [CONTROL] of postpartum hemorrhage;

12 AAC 14.570(7) is amended to read:

(7) uterotonic agents such as oxytocin, methylergonovine, carboprost tromethamine, and misoprostol [METHERGINE, ADMINISTERED ORALLY OR BY INTRAMUSCULAR INJECTION, IN AN EMERGENCY SITUATION] for the control and treatment 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 2,000 milliliters **administered** [ADMINISTRATED] intravenously to a client who would benefit from hydration;

“(Publisher: To reflect the addition of 12 AAC 14.570(12), please change the period at the end of 12 AAC 14.570(11) to a semicolon.)”

12 AAC 14.570 is amended by adding a new paragraph to read:

(12) ^{an} anti-diarrheal agent ^{C, including} such as loperamide or diphenoxylate/atropine. (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 9/9/2016, Register 219)

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

~~AS 08.65.140(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 competence as set out in 12 AAC 14.560 may **attend or deliver a woman whose**

~~condition is outside the scope of practice in AS 08.65.140(4).~~ *(under 12 AAC 14.150)*

[(1) PERFORM AN EPISIOTOMY; AND

(2) ADMINISTER PITOCIN, METHERGINE, EPINEPHRINE, AND

DIPHENHYDRAMINE AS DESCRIBED IN 12 AAC 14.570(6), (7), (10) AND (11)]. (Eff.

5/11/94, Register 130; am 5/2/2004, Register 170; am 9/9/2016, Register 219)

Authority: AS 08.65.030

AS 08.65.140

AS 08.65.190

12 AAC 14.610 is readopted without change:

12 AAC 14.610. Emergency transport plan.

...

(Eff. 5/11/94, Register 130; readopt 9/9/2016, Register 219)

Authority: AS 08.65.030

[AS 08.65.140]

AS 08.65.190

and S, ch. 99, SLA 2014 repealed former AS 08.65.140(e) and (f), provisions regarding actions during verifiable emergencies, but retained language in the definition of "practice of midwifery" in AS 08.65.190 that allows the execution of emergency measures in the absence of medical assistance, as specified in regulations adopted by the board.

12 AAC 14.900(b)(6) is amended to read:

(6) provide **communication and** records to the board and division investigative

staff, as requested by the board or division investigative staff; and

12 AAC 14.900(c) is amended to read:

(c) A certified direct-entry midwife shall submit to the board or, if an organization has 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 **January** [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 **or** [THROUGH] the organization providing peer review [FOR CASES SELECTED UNDER (b)(2)]

OF THIS SECTION]; and

not later than 14 [WITHIN 10]

(3) ~~within 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 in this state

(A) died;

(B) required emergency hospital transport;

(C) required intensive care during within the first week after birth; or

(D) had any of the complications or conditions listed in ~~AS 08.65.140(4)~~

2 ~~and 12 AAC 14.150~~ [AS 08.65.140(d)(1) - (17)] if the mother was attended in active

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

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

(Eff. 5/16/96, Register 138; am 2/23/2007, Register 181; am 9/9/2016, Register 219)

Authority: AS 08.65.030 AS 08.65.110 AS 08.65.140