



**Sacopee Midwives**  
Certified Professional Midwives serving  
greater Portland and beyond since 1995

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## Home Birth Informed Consent Document

We believe in home birth as a safe alternative to the hospital, and quite often it ends up being an empowering, rewarding and life changing experience. Risks are involved in childbirth no matter where it occurs. These risks are different depending on the health of the birthing person, and in some part on the location of the birth. Immediate and advanced medical technology is not available at home, yet fewer unnecessary interventions take place at home. Studies show that the home is as safe or safer for the baby and birthing person as long as the pregnancy is low risk and healthy, and the birth was planned to be a home birth.

There are times when a doctor or hospital is necessary, and we will not hesitate to include a doctor in your care or transfer to a hospital when a situation arises that we are not comfortable with. We are not obstetricians, and our scope of practice involves normal pregnancy and birth, as well as a few deviations from normal. When a pregnancy or birth moves out of our range of expertise, we will consult with other midwives or physicians. We are trained to spot problems before they become an issue, and will do so with careful monitoring throughout your pregnancy, labor and birth. We are trained to manage certain complications in labor at home. If a complication arises that is beyond our scope of care we will transport you to the hospital.

We believe that every pregnant person has the right to choose where and with whom they have their baby, however, our practice is limited to low risk pregnancies and births. Should your pregnancy fall out of the low-risk category, other arrangements will have to be made for the birth. We expect parents to be well informed and take responsibility for reading and educating themselves. 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 difficulties we have dealt with are fetal distress, prolonged labor, dehydration, meconium, breech presentation, placenta abruption, placenta previa, shoulder dystocia, postpartum hemorrhage, stillbirths, birth defects, and respiratory distress in the baby.

If a situation arises where a doctor or hospital is necessary, we generally choose to refer people to Maternal Fetal Medicine at Maine Medical Center in Portland. At this time, our practice does not have a formal back-up relationship with any obstetric provider. You may arrange your own obstetrical and pediatric back up. It is mandated that hospitals may not refuse emergency care to pregnant or laboring people. Some hospitals have nurse-midwives who take care of walk-ins, while other hospitals inform the obstetrician on call. In either case, without a private physician back up, you will not know who will manage your birth ahead of time. In the event of transport to the hospital, we will facilitate the transfer of care, and make every effort to stay with you throughout the process.

We do not carry malpractice insurance. It is not accessible to home birth midwives. We feel comfortable with this knowing that the relationships we forge with the families we care for are strong, honest and open, and expect that any difficulties will be addressed directly.

Brenda, Acadia, Grace and Danielle are Certified Professional Midwives. CPMs are licensed by the State of Maine. Complaints of care can be directed to the State of Maine Complementary Health Care Board.

At this time Acadia, Danielle and Grace are also licensed in the state of New Hampshire. Complaints of care can be directed to the NH Midwifery Council through the Office of Professional Licensure & Certification.

We maintain our licenses through mandated continuing education approved by Midwives Alliance of North America and the National Registry of Midwives and the College of Nurse Midwives.

Our transport rate is approximately 10% and our cesarean section rate is approximately 3%.

**As your Midwives we will:**

- Provide routine prenatal and postpartum visits at our office, virtually, or in your home
- Monitor the course of your pregnancy including: blood pressure, fetal heart monitoring, fundal height measurements, urinalysis (as indicated), and the position of the baby.
- Provide desired or appropriate tests when necessary.
- Provide nutritional, childbirth and lactation education.
- Provide emotional support throughout the pregnancy, birth, and postpartum.
- Manage the labor and birth of the baby and the placenta
- Suture tears as needed
- Care for you and your baby in the postpartum period
- Process the birth certificate
- Provide newborn eye-ointment, vitamin K, the Newborn Metabolic Screen, and the CCHD for the newborn as desired
- Consult with physicians as or if needed and transfer care when appropriate

**Informed Choice and Fees**

**As a client receiving care from this practice we ask that you:**

- Be honest and open with information as it applies to your pregnancy and birth
- Ask for what you desire
- Collect all the supplies needed before the birth
- Compensate us for our services as agreed
- Care for yourself and your child to the best of your abilities
- Read and understand our “Emergency Care Plan for Sacopee Valley Birthing Services”
- Read all client forms thoroughly before signing
- Educate yourselves on pregnancy, birth and the postpartum period. We highly suggest taking a childbirth education class or hiring a doula who can offer additional support and education. There are also many resources such as books and podcasts that we are happy to share with you.

Our fee covers services that are provided by our practice, and include prenatal care, the labor and birth, and postpartum home visits. Outside lab work, ultrasounds, physician and/or certified nurse midwife consultations, vitamins and birth supplies are not included in our fee. We believe that every family should be able to have a homebirth if that is in their hearts. We will be flexible with payment arrangements. If another birth is taking place during yours, at least one of us will remain with you and we will call in an additional assistant.

One of the basic tenets of midwifery care is the idea of informed choice. We do not feel comfortable with you making decisions without fully understanding the benefits and risks associated with those choices. We believe that one of our main duties is to provide you with enough information so you feel completely

comfortable and educated concerning your pregnancy and birth. We encourage you to explore your options, research independently, and ask questions.

We have read Sacopee Midwives Informed Choice for Midwifery Care and Emergency Care Plan. We confirm that we understand our options in childbirth. We are choosing to have independent certified professional midwives attend us at the birth of our child in our home. We have researched other options including hospital based care providers and birth centers. We feel that home birth is best for our family. We have had a chance to ask any further questions of our midwives and feel confident that we will receive appropriate care and information. As a pregnant person, I agree to care for my child and myself by eating healthy, nutritional food; exercising appropriately; sharing my past medical history; and educating myself about the birth process. I will attend regularly scheduled prenatal visits and I will not abuse cigarettes, drugs and alcohol.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

### **Sacopee Midwives Emergency Care Plan**

In case of a medical emergency while in the presence and care of a client we will take the following steps:

- Stabilize the client and or newborn to the best of our abilities and seek advanced medical care.
- Continue care of the client or newborn during the entire process, until more experienced care takes over. This care will include adult CPR, measures to cease hemorrhage, neonatal resuscitation, and treatment of shock.
- Gather more advanced medical care either through transporting the client or newborn to the closest hospital, or by calling 911 and activating Emergency Medical Services. The mode of transport will be case sensitive due to location, driving conditions, speed of the local emergency responders and the clients input as well. We will transport to the closest hospital / the hospital with the most appropriate level of care in case of an emergent situation, and possibly to a more preferred hospital in case of a non-emergent situation in need of transport.
- We will always include the client in the decision of care in case of an emergency, strongly urging and suggesting the safest option in our professional opinion, yet listening to their opinion as well.
- We will never leave the client or newborn until it is deemed appropriate by the family or necessitated by other care providers.

### **Guidelines for planned homebirth in Maine and New Hampshire:**

The following are links to the midwifery practice guidelines in Maine and New Hampshire including a description of our scope of practices as well as reasons for consultation, collaboration, referral and transfer of care.

[Maine](#)

[New Hampshire](#)