Natural Choice

MIDWIFERY

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INFORMED CHOICE AGREEMENT

1. Introduction

Giving birth has been a natural part of human life since the beginning of time. Over the years this has evolved to become many things. Belief in pregnancy and birth may be interpreted in many ways. In some ways, it has been interpreted as life-threatening and needing many modern day interventions. There are many that believe birth is natural and safe. This may be obtained with the right care provider and environment. Birth with a trained midwife has been shown to be safe or even safer than a hospital birth. This may be accomplished by collaboration with the pregnant woman and her midwife of choice by receiving routine pre-natals, abstaining from alcohol and drugs, getting proper nutrition, exercise and self-educating about birth.

2. Education and Experience

Pamala Wilson

My medical career began in 1987 as certified nursing assistant (CNA) then I moved onto my emergency medical training (EMT), I furthered my EMS training as a paramedic including advanced training in ALS and PALS in 1992. I also worked as a phlebotomist at a local hospital. My birth experience began with the birth of my first child along with maternity rotations on L&D. By the time my third daughter made her arrival in 1999 I began to make more informed choices. I really tabled my desire to attain a nursing degree or a midwifery degree while I was raising my girls and taking care of a special needs child. After moving to North Carolina in 2008 I was reintroduced to midwifery and continued my education and graduated from a South Carolina Department of Health approved midwifery school, completed a 3 year clinical apprenticeship, and passed the North American Registry of Midwives (NARM) board examination in 2011. I am a Certified Professional Midwife (CPM) certification through NARM (North American Registry of Midwives) and a SC (South Carolina) midwifery license through the SCDHEC (South Carolina Department of Health). I am certified with the American Heart Association and the American Academy of Pediatrics as a basic life support healthcare provider for adult, child, infant and neonatal resuscitation. I have been attending families and delivering babies since 2009. I have worked in the homebirth setting along with a high volume birth center. My experience and varied birth settings have given me ample experience with complications including, but not limited to, anemia, hypertension, miscarriage, hemorrhage, shoulder dystocia, tight cords, abnormal fetal presentations, fetal distress during/after birth, and postpartum/placental complications. I keep my skills updated by completing continuing education requirements set by NARM. Also, I participate in peer reviews with other licensed midwifery professionals for accountability.

3. Services Provided

Availability

A midwife will be on call 24 hours a day, seven days a week, once your pregnancy reaches 36.6 wks.

Visits

As part of my services, I will meet with the mother and any other people she wishes, for educational purposes and routine prenatal visits at your home or birth center once a month until your pregnancy reaches 28 weeks, then every two weeks until you are 36 weeks, then once a week until the baby is born. During these visits, routine procedures (blood pressure, measurements of your abdomen, checks for protein or glucose in your urine, weighing, listening to the baby's

heartbeat) will be performed. We will discuss diet, exercise, rest and total well- being. After the birth, I will make at least one visit to your home.

Treatments or Procedures

Any needed treatments or procedures for you can be arranged through a consulting physician with advance notice. All laboratory tests for a pregnant woman will be offered to you and can either be performed at your home/birth center or at a laboratory. We do not routinely perform tests or administer medications without your informed consent. At any time, you may request or decline additional laboratory test including ultrasound. The state law requires that care providers for mothers and babies perform certain procedures. If you refuse any required procedures, or if you should decide to disregard my suggestions in reference to your care, you will be required to sign a waiver assuming responsibility for the consequences.

Staff

The state regulations require that you have two visits with a Physician, CNM or NP. We will also consult with an OB/Gyn or CNM if you have any indications of conditions to be out of the normal range. Due to restraint of time in an extreme emergency, we will proceed to the nearest hospital and obtain the services of the physician on call at that hospital. A midwife "CPM" will supply additional coverage if for some reason I am not able to perform duties (illness, death or planned vacation/events) or is attending another client in labor. If you are transported to the hospital, but another client is in need of our services at home, an assistant or doula will take my place. An apprentice/assistant will attend some prenatal visits and your birth. All of the assistants/apprentices will be certified in neonatal resuscitation. Usually, only one assistant will be assigned to your birth.

Birth

At the first sign of labor, you should notify me, regardless of the time of day. We (assistant and myself) will be at your side to render support whenever you are ready for us to come. We do have oxygen, and some medications/herbs available if needed. After the birth we will stay with you until both you and the baby are stable, typically a minimum of 2 hours (if at home).

Malpractice Insurance

I do not carry any malpractice insurance for this practice or as individuals for several reasons. This practice's services are based on decisions being made by you, not by me. We will give you the information we have available and expect you to also research the issues so that you may make decisions regarding your care. If we were to carry malpractice insurance, we would be required to practice according to the insurance company's protocols and this might conflict with your interest.

If you decide to take Natural-Choice Midwifery to court, you will pay all court fees.

Grievance Process

In the event you wish to file a complaint against the services of a CPM, you may do so by contacting the South Carolina Dept. of Health at www.scdhec.gov/health/licen/complaint.html. You may also contact NARM (North American Registry of Midwives):

NARM Board c/o Debbie Pulley 5257 Rosestone Drive Lilburn, GA 30047 1-888-842-4784

Complaints with NARM must be filed within eighteen months of occurrence.

Limitations of service

This practice is for women with *low risk* pregnancies. Therefore, we will refer out any clients who need the attention of a Physician. Below is only a sample of conditions considered *not* to be "low risk":

- o Birth before 37 weeks or after 41weeks 6 days,
- o A mother who smokes or uses drugs inappropriate with home birth
- o Placenta previa or abruption o Abnormal hemoglobin level
- o Extremely elevated blood pressure over base line
- o Gestational Diabetes not controllable by diet

I reserve the right to discontinue services if you should move more than a one hour driving distance from Fort Mill South Carolina, if you should fall out of the low risk category, or if you should be non-compliant with suggestions regarding your health, and/or safety of a home birth.

I cannot deliver your baby in a hospital. If complications arise, you will need to have another Care Provider. However, I (or a trained assistant), will stay with you as a doula and to inform the hospital staff of medical history, as long as you wish. South Carolina Rules and Regulations restrict persons who are not employed by the hospital to perform any clinical procedures in that hospital.

I do not use pain-relieving medications.

4. Client Responsibilities

Be honest with me about your health history and any other health information we discuss during your care.

It is your responsibility to become as educated as possible about birth. With your education and research you will be required to make decisions on the management of your care to include procedures or test performed. Take care of yourself, eat right, exercise, rest, and drink a lot of water. Do not drink alcohol. Do not take ANY drugs, herbs or other supplements without consulting with us (even if recommend by another Care Provider).

Your financial responsibility is detailed in the financial agreement please refer to your financial agreement for any personal responsibilities.

5. Disclaimers

NCM Midwife Signatures_

l/we as parents have chosen to give birth	h at home as long as the pregnand	cy is considered to be normal and low
risk. We have read and understand this agreen	nent. We understand that Pamala	Wilson isn't a physician and are
accepting full responsibility for the pregnancy	and for the birth. We realize that	in a small percentage of cases,
complications may arise which cannot be adeq	quately dealt with at home. A few	of these complications could possibly be
prevented or minimized in the hospital. In other cases the results would be inevitable. Despite this we feel that the		
benefits of home delivery outweigh the possib	ole risk involved, and to the extent	permitted by law will not hold the
practice, midwife, or her assistants responsible	e for outcomes that are a result of	complications beyond their control.
I/we give consent for NCM to transfer m	ny baby's records and/or my record	ds if either of us needs to have care with
an institution or with another care provider.		
6. Signatures		
By my/our signatures below I/we verify that I/v	we have read and understand the	above agreement and have agreed to
fulfill my/our obligations to Natural-Choice Mid	dwifery as stated above.	
Client Name Printed/Signed	J	Date
Client Name Printed/Signed		Date