

California College of Midwives
State Chapter ~ American College of Community Midwives

Section Four

A Clarifying Commentary on Intrapartum Transport

California licensed midwives have expressed concern that CCM Standards & Guidelines wrongly restrict the choice of transportation during the intrapartum period to the paramedic system, even in situations where clearly the most appropriate, most expeditious transportation arrangement would be by automobile. This is a concern in regard to the time factor (as documented in the research paper on the topic by medical anthropologist Robbie Davis Floyd, PhD) and also in regard to family or midwife arranged transportation that delivers the mother to the hospital where her doctor has practice privileges or the best equipped hospital for the specific medical needs of mother or baby.

These topics are addressed in Section I-H- and Section II-D of the CCM Standards and Guidelines (text below). When reviewed, it is clear that neither one restricts or specifies a mode of transportation, except to identify the obligation of the midwife to choose an “appropriate” process.

∞ Section I-H, division G:

Transport for immediate, urgent, or emergent medical care: In the event that immediate medical evaluation or medical intervention is necessary, the **licensed midwife and/or the client family shall initiate an appropriate transportation** process for mother and/or neonate.

∞ Section –D, Transfer of Care in an Emergency Situation: In an emergency situation, the midwife is the “first responder” whose immediate responsibility is to initiate emergency care as indicated by the situation. Concurrently with the first-responder role, the midwife shall initiate immediate transfer of care in accordance with practice guidelines and the specific arrangements identified in the client’s emergency transfer plan. The midwife shall make a reasonable effort to contact the health care professional and/or institution to whom the client will be transferred and to follow the health care professional’s instructions; and continue emergency care as needed while:

1. **transporting the client by private vehicle or**
2. **calling 911 and reporting the need for immediate transfer**

Clarifying Commentary December 2004: The following criteria were developed to assist LMs in determining which form of transportation is most appropriate in an individual situation.

When time rather than care is the most critical factor, expedited transport may be achieved via privately owned vehicle. If on-going medical care is required en route to the hospital, an ambulance or EMT-staffed paramedic vehicle will need to transport the mother or baby to a medical facility equipped and staffed to provide acute medical care.