



**Characteristics of Clinical Competency
associated with science-based maternity care**

Index

 Section Two: Consult, Refer, Transfer & Minimum Practice Requirement

- 2A. **Criteria for Client Selections ~ Eligibility for Domiciliary Birth Services**
- 2B. **Safe Environment for Planned Home Birth**
- 2C. **Equipment & Administration of Medications**
- 2D. **Emergency Care & Emergency Transfer**
- 2E. **Minimum Practice Requirements ~ Antepartum Care**
- 2F. **Physician Consult and Transfer of Care ~ Antepartal period**
- 2G. **Minimum Practice Requirements ~ Intrapartum (L&D)**
- 2H. **Physician Consult and Transfer of Care ~ Intrapartal period**
- 2 I. **Minimum Practice Requirements ~ Postpartum care**
- 2J. **Physician Consult and Transfer of Care ~ Postpartal period**
- 2K. **Minimum Practice Requirements ~ Neonatal care**
- 2L. **Physician Consult and Transfer of Care ~ Post Neonatal period**
- 2M. **Assessing the Neonate, Evaluating Deviations from Normal Physiology**
- 2N. **Instructions for Parents on Newborn Care,**