



## **Informed Consent for Home Birth Care with Birth & Beyond**

This document is intended to describe and clarify the relationship between Birth & Beyond (referred to as "B&B") and you, the client. It will serve as a general consent for care, and as consent for B&B to provide you, your partner if applicable, and your baby (collectively referred to as "you," "I") with home birth care.

It is important that you be fully informed about B&B services, and that you be an active participant in your health care. Do not hesitate at any time to ask questions about your care. We take every reasonable measure to ensure your safety and comfort.

### **General Consent**

*I engage and authorize the midwives and birth assistants of B&B to perform, according to the expertise of each, physical examinations on my person, to confirm general health and pregnancy status, obtain relevant specimens, and perform customary diagnostic procedures. I engage and authorize the midwives and birth assistants of B&B to provide me with treatment as needed including, but not limited to, health education and instruction, physical examination, oral, injectable, and intravenous medications, and prenatal, intrapartum, postpartum, and newborn care.*

*I understand that my selection by and treatment as a client of B&B requires that I provide medical history and personal information. I agree to provide accurate health information and affirm that such information is and will be correct to the best of my knowledge. I agree to the honest sharing of information. I agree to follow the mutually agreed upon plan of care. I acknowledge that unwillingness to follow the plan of care, or unwillingness to be financially responsible for my care, gives B&B the right to terminate care. If such termination of this agreement becomes necessary, B&B will inform me verbally and in writing. I may voluntarily withdraw from the care of B&B at any time by giving verbal or written notice.*

### **Consent for Home Birth**

Birth is a physiologic process. Several recent studies demonstrate that planned home birth for healthy low-risk women is as safe as hospital birth. There are risks and benefits associated with both hospital and home birth.

Although it is our priority to take reasonable precautions and perform careful assessments to ensure the safety of mother and baby, despite these measures, adverse outcomes can occur in any setting. In the home, there are fewer diagnostic and therapeutic tools available than in the hospital. The home is not equivalent to hospital facilities that have equipment for dealing with serious medical complications. Similarly, there are constraints to hospital care. Restriction of movement and restriction of nutrition are common in the hospital, despite credible studies demonstrating the detrimental effects of these practices. Medical interventions and non-emergency cesarean sections happen more frequently under hospital care, leading to additional risk exposure.

When birth emergencies or poor outcomes occur in the hospital, the birth place is rarely called into question. Your midwives cannot guarantee a “normal” birth or healthy mother or baby. B&B’s acceptance of you as their client in no way constitutes such a guarantee.

*I understand that no matter how carefully my risk status is evaluated, there can arise emergencies or unforeseen events that can result in illness, injury, disability, or even death to the mother or infant, whether in home or hospital care. These conditions include, but are not limited to, excessive blood loss, infection, placental abruption, uterine rupture, anaphylactic shock, congenital anomalies, fetal distress, malpresentation, birth injuries, and stillbirth.*

### **Affirmation**

*All decisions that we make carry possible risks and benefits. We have chosen to have a home birth after carefully considering alternative settings, such as hospital or birth center. We have discussed our decision and have had the opportunity to have all of our questions answered by a B&B midwife. In light of this, we request that B&B provide our prenatal, postpartum, and newborn care and assist us at our home birth.*

Mother signature: \_\_\_\_\_ Date: \_\_\_\_\_

Partner signature: \_\_\_\_\_ Date: \_\_\_\_\_

Midwife signature: \_\_\_\_\_ Date: \_\_\_\_\_