LICENSED MIDWIFE ANNUAL REPORT

California Midwives’ User Guide
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Introduction
The Licensed Midwife Annual Report (LMAR) User Guide is designed to assist midwives in their reporting of previous year’s service provided in California. This guide will walk the midwife through the process of:

- Registering and setting up a new password
- Logging in to LMAR
- Completing, reviewing, and printing their annual report
- Submitting their report to the Office of Statewide Health Planning and Development (OSHPD)

Note: An electronic copy of this user guide may be found at the Medical Board of California’s Licensed Midwives web page:

http://www.mbc.ca.gov/Licensees/Midwives/Imar_UserGuide.pdf

Accessing LMAR
Navigate to the following web address to access the LMAR system:

https://lmarns.oshpd.ca.gov/

You will be presented with the screen below – this is the main LMAR login screen. Please note the references to the due date of your report (March 30, 2015), and to turn off pop up blockers.
Registration
You must register before you can submit your annual report online. Please remember that you must use the same information as on your license.

New Users
1. Click the `Register` button located at the bottom of the `User Login` screen, or click the `Register` menu option at the top of the screen – both methods will take you to the New User Registration screen. Fields with an asterisk (*) are required. You must fill in all required fields in order to complete your registration.

![Registration Details](image)

2. Place the cursor in the Email Address: * field and type your email address.
3. Tab to the **Username:** field and type your username. This will be the username that you use to login to the LMAR system. Your user name should be between 6 to 15 characters, and must not contain spaces or special characters.

4. Tab to the **Password:** field and type your password. Your password should be between 8 to 16 characters, must have at least one (1) alpha and one (1) numeric character, and cannot contain spaces or special characters.

5. Tab to the **Confirm password:** field and retype your password exactly as you had typed in the previous password field.

**The next six fields must match your license record exactly!**

6. Tab to the **License #:** field and type your license number.

7. Tab to the **First Name:** field and type your first name.

8. Tab to the **Middle Name:** field and type your middle name (not required).

9. Tab to the **Last Name:** field and type your last name.

10. Tab to the **Last 4 Digits of SSN:** field and type the last four digits of your social security number.

11. Tab to the **Date of Birth:** field and type your date of birth in MM/DD/YYYY format.

12. Tab to the **Phone 1:** field and type your phone number (not required). If you wish to provide another phone number, click in the **Phone 2:** field and enter a second phone number.

13. Review the contents of this page for correctness and make changes if necessary. To complete your registration, click the **Register** button.

    **Note:** If you click the **Clear** button, you will lose your information and have to begin again.

When you have successfully registered, you will receive the following screen. Click the **Login** button to continue.
**Existing Users**
If you are returning to the LMAR system after having previously registered, please continue by logging in with your username and password. If you have forgotten your password, please refer to the “Forgot Password” section to create a new password.

**Forgot Password**

1. If you have forgotten your password, click the **Forgot Password** menu option.

   **Forgot Password**
   For security reasons, we store your password encrypted, and cannot mail it to you. Please enter your registered email address below and we will send you a temporary password so you can reset your password.

   If this will not work for you (for example, if your email address has changed), contact us.

   Registered Email Address: *

   ![Email](Email) ![Back](Back)

2. Type your **Registered Email Address**: * in the field, and click the **Email** button. You will be sent a temporary password which you must change.

3. If you clicked this **Forgot Password** screen by accident, click the **Back** button to return to the **Login** screen.

4. Click **contact us** if you do not receive a response within a few days.

**Contact Us**

*For questions concerning the annual report or other information related to licensed midwives, please contact the Medical Board at (916) 263-2382, Webmaster@mbc.ca.gov, or:*

Medical Board of California  
Attn: Midwifery Program  
2005 Evergreen Street, Suite 1200  
Sacramento, CA 95815

*For technical questions related to the submission of the annual report, please contact the Office of Statewide Health Planning and Development (OSHPD) at (916) 326-3935 or CLMAR@oshpd.ca.gov*
Log in to LMAR

1. If you have already successfully registered and have not submitted your report for the current year, enter your account information and click the Login button.

2. Click the Go! button to begin the process of completing your annual report.

Note: To complete or return to a particular section, click on the section title. This is noted in red at the top of the annual report screen, and when you pass your cursor over a section header, it turns red. Also, across from Section B, a message in red displays reminding you of your annual report due date.
Report Instructions

Click the **Report Instructions** menu choice (located at the top of the screen) for instructions on how to add data to your annual report. Read through these instructions before you begin. More detailed instructions on how to complete a section is located in each section screen.

To return to the main report screen, click the **Close** button located in the top right corner.
Report Sections

Before You Begin – Helpful Hints

- Each screen will ask if you have read and understand the section instructions before you can enter data on the section data entry screen.

- Each section screen will provide you with a link to access the definitions page.

- You may return to your report screen from any section screen by clicking the Close button located in the upper corner of the data entry screen.

- If you place your mouse pointer over some blocks of underlined text, a screen tip will display the definition of the underlined word. This lasts about five seconds. If the tip disappears before you have finished reading, simply move your mouse pointer over the word again. If the entire definition does not fit in the tip, there will be a reminder to see the definitions page for a more detailed definition.

- After saving a section, you will return to the main report screen. Notice that recently saved sections will appear as Updated. If you need to return to a section to add or edit data, you may click on the section header at anytime (so long as you have not made your final submission to OSHPD).

Expired Session

The LMAR system is set to timeout after 20 minutes of non-activity. If you leave your LMAR session idle for 20 minutes or more, you will receive a session expired pop-up box when you attempt to access any part of the system. Click OK to return to the log in screen and log back into LMAR.
Section A – Licensee Data
If you wish to update your personal information, click on **SECTION A - LICENSEE DATA**. Your name, license number, and e-mail address will appear in the respective fields. You can only change your phone numbers and e-mail address on this screen.

![SECTION A - LICENSEE DATA](image)

**Save:** Click the **Save** button to save your changes or additions.

**Close:** If you decide to close this screen without updating, click the **Close** button and confirm that you wish to leave the page without saving.
Section B – Reporting Period

Section B simply reminds you of the current reporting year and the due date of your annual report. There is no data for you to enter in Section B.

<table>
<thead>
<tr>
<th>SECTION B - REPORTING PERIOD</th>
<th>Report due no later than</th>
</tr>
</thead>
</table>

Section C – Services provided in California

When you pass your cursor over Section C, note the red color change of **SECTION C - SERVICES PROVIDED IN CALIFORNIA**. Also, note that your annual report should reflect only services provided in California!

1. If you **DID NOT** provide services in California in the previous year:
   a. Click **No**
   b. Click the **Save and Continue** button.
   c. Click **Yes** to confirm your “No” selection.
   d. Proceed to page **39** of this User Guide.
2. If you **DID** provide services in California in the previous year:
   a. Click **Yes**
   b. Click the **Save and Continue** button.

   **Note:** If you click the **Exit Report** button, you will return to the **My Report** screen.

c. Click **Yes** to confirm your selection.

3. The following screen will display:
4. Click the section title UPDATE button to enter into that section. For example, to enter data into Section D, click on “SECTION D – CLIENT SERVICES” or the “Update D” link.

5. Please notice the [Click here to provide comments] link at the bottom of the screen. You may click this link at anytime to provide comments or feedback related to a particular section. This topic will be addressed later in this documentation.

6. You may save your report and return to it for later editing and saving by clicking on the Save for later updates button.
Section D – Client Services
To access this section, click the Section D - CLIENT SERVICES section title or the Update D link from the main report screen.

1. Read the Section D instructions.
2. Check the [I have read and understand Section D instructions] box.

3. The following screen will be available to you:

4. If you have on this screen, click this button. You will return to the main report screen.
5. Click in the blank fields in the Total # column to type your numbers where appropriate and as the Line No. item indicates.
6. After you have typed your numbers in the appropriate fields, click . You will return to the main report screen.
7. If you wish to exit this screen and return to it later, click . You will be asked if you want to close without saving. Click
Section E – Outcomes per County in which Birth, Fetal Demise, or Infant or Maternal Death Occurred

1. Click the section title or Update E link.

2. Read the instructions and check I have read and understand Section E instructions!. The following screen will be available to you:
3. Read the directions at the top of this box to become familiar with all columns to accurately add your numerical data.

4. If you have No Data to Report, click this button. You will return to the main report screen. Otherwise, click the Add button.

5. Expand the county drop down by clicking the down-facing arrow in: ALAMEDA

6. Scroll through the list of California counties and select the appropriate county where you provided services for the previous year.

7. Type your numerical data associated with the county where you provided services to all columns B through E as appropriate. If you have no data to provide for any column, enter 0.

8. If you provide services in another county, click the Add button again to add another row and repeat steps 4 through 7 for each additional county.

9. If you add a county and data in error, click Remove. Click Save to save your entry. (Click Close to exit this screen without saving the data.)

10. If you add data to column C, you will receive the following dialog box. Click Close after reading the message.
11. If you add data to column D, you will receive the following dialog box. Click Close after reading the message.

![Dialog Box for Column D](image1.png)

12. If you add data to column E, the following dialog box will appear. Click Close after reading the message.

![Dialog Box for Column E](image2.png)

**Note:** *Section E is linked to Section P in that if you provide data in columns D and/or E you must report complications for these deaths in Section P. This will be covered again in Section P of this guide.*

13. After you have typed your numbers in the appropriate fields, click Save. You will return to the main report screen.

14. If you wish to exit this screen and return to it later, click Close. You will be asked if you want to close without saving. Click OK.
Section F – Outcomes of Out-of-Hospital births

1. Click the **SECTION F - OUTCOMES OF OUT-OF-HOSPITAL BIRTHS** section title or **Update F** link.
2. Read the instructions and check [I have read and understand Section F instructions!]. The following screen will be available to you:

<table>
<thead>
<tr>
<th>Line No.</th>
<th>Total #</th>
</tr>
</thead>
<tbody>
<tr>
<td>19</td>
<td></td>
</tr>
<tr>
<td>20</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td></td>
</tr>
<tr>
<td>22</td>
<td></td>
</tr>
<tr>
<td>23</td>
<td></td>
</tr>
<tr>
<td>24</td>
<td></td>
</tr>
</tbody>
</table>

3. If you have [No Data to Report], click this button. You will return to the main report screen. Otherwise, click in the blank fields in the Total # column to type your numbers where appropriate and as the Line No. item indicates.

4. After you have typed your numbers in the appropriate fields, click [Save]. You will return to the main report screen.

5. If you wish to exit this screen and return to it later, click [Close]. You will be asked if you want to close without saving. Click [OK].
Section G – Antepartum Transfer of Care, Elective/Non-Emergency

1. Click the **SECTION G - ANTEPARTUM TRANSFER OF CARE, ELECTIVE/NON-EMERGENCY** section title or the Update G link.

   ![Screenshot of the section](image)

   Lines 25-44: For each reason listed, enter the number of clients who, during the antepartum period electively (no emergency existed) transferred to the care of another healthcare provider. Report the primary reason for each client.

   If there is nothing to report on a specific line, please leave it blank.

   See definition page [here](#).

   ![Checkbox for understanding the instructions](image)

2. Read the instructions and check the box **I have read and understand Section G instructions!**. The following screen will be available to you:

   ![Table of reasons](image)

   - **Line No.**
   - **Code**
   - **Reason**
   - **Total #**
3. If you have No Data to Report, click this button. You will return to the main report screen. Otherwise, click in the blank fields in the Total column to type your numbers where appropriate and as the Line No. item indicates.

4. When you add numerical text to Line No. 44 and click Save, you will receive the following extension screen requesting an explanation of Other. You have space for 500 characters. If you have more than a one count in the Other field, add an explanation as shown in the example below.

![Extension Screen](image)

5. After you have typed your numbers in the appropriate fields, click Save. You will return to the main report screen.

6. If you wish to exit this screen and return to it later, click Close. You will be asked if you want to close without saving. Click OK.
Section H – Antepartum Transfer of Care, Urgent/Emergency

1. Click the **SECTION H – ANTEPARTUM TRANSFER OF CARE, URGENT/EMERGENCY** section title or **Update H** link.

2. Read the instructions and click **I have read and understand Section H instructions!**. The following screen will be available to you:

   ![Section H Instructions](image)

   Lines 45-54: For each reason listed, enter the number of clients who, during the antepartum period, were transferred to the care of another healthcare provider due to an urgent or emergency situation. Report only the primary reason for each client.

   If there is nothing to report on a specific line, please leave it blank.

   See definition page [here](#).

   ![Section H Instructions](image)

3. If you have **No Data to Report**, click this button. You will return to the main report screen. Otherwise, click in the blank fields in the **Total #** column to type your numbers where appropriate and as the **Line No.** item indicates.
4. When you add numerical text to **Line No.** 54 and click **Save**, you will receive the following extension screen requesting an explanation of **Other**. You have space for 500 characters. If you have more than a one count in the **Other** field, add an explanation as shown in the example below.

![Extension screen](image)

5. After you have typed your numbers in the appropriate fields, click **Save**. You will return to the annual report screen.

6. If you wish to exit this screen and return to it later, click **Close**. You will be asked if you want to close without saving. Click **OK**.
Section I – Intrapartum Transfer of Care, Elective/Non-Emergency

1. Click the **SECTION I – INTRAPARTUM TRANSFER OF CARE, ELECTIVE/NON-EMERGENCY.** Section title or **Update I** link.

![Screen shot of Section I Instructions]

Lines 55-67: For each reason listed, enter the number of clients who, during the Intrapartum period, electively (no emergency existed) transferred to the care of another healthcare provider. Report only the primary reason for each client.

If there is nothing to report on a specific line, please leave it blank.

See definition page here.

☐ I have read and understand Section I instructions!

2. Read the instructions and check **☐ I have read and understand Section I instructions!**. The following screen will be available to you:

![Table of reasons for transfer]

3. If you have **No Data to Report**, click this button. You will return to the report screen. Otherwise, click in the blank fields in the **Total #** column to type your numbers where appropriate and as the **Line No.** item indicates.
4. When you add numerical text to Line No. 113 and click Save, you will receive the following extension screen requesting an explanation of Other. You have space for 500 characters. If you have more than a one count in the Other field, add an explanation as shown in the example below.

5. After you have typed your numbers in the appropriate fields, click Save. You will return to the annual report screen.

6. If you wish to exit this screen and return to it later, click Close. You will be asked if you want to close without saving. Click OK.
Section J – Intrapartum Transfer of Care, Urgent/Emergency

1. Click the **SECTION J – INTRAPARTUM TRANSFER OF CARE, URGENT/EMERGENCY** section title or the **Update J** link.

2. Read the instructions and check **I have read and understand Section J instructions!**. The following screen will be available to you:

3. If you have **No Data to Report**, click this button. You will return to the report screen. Otherwise, click in the blank fields in the **Total #** column to type your numbers where appropriate and as the **Line No.** item indicates.

4. After you have typed your numbers in the appropriate fields, click **Save**, and you will return to the annual report screen.

5. If you wish to exit this screen and return to it later, click **Close**. You will be asked if you want to close without saving. Click **OK**
Section K – Postpartum Transfer of Care – Mother, Elective/Non-Emergency

1. Click the Section K – Postpartum Transfer of Care – Mother, Elective/Non-Emergency section title or Update K link.

   ![Section K Instructions]

   Lines 77-95: For each reason listed, enter the number of clients who, during the postpartum period, electively (no emergency existed) transferred to the care of another healthcare provider. Report only the primary reason for each client.

   If there is nothing to report on a specific line, please leave it blank.

   See definition page [here](#).

   [ ] I have read and understand Section K instructions!

2. Read the instructions and check [ ] I have read and understand Section K instructions! The following screen will be available to you:

   ![Table of Reasons]

3. If you have [No Data to Report], click this button. You will return to the report screen. Otherwise, click in the blank fields in the Total # column to type your numbers where appropriate and as the Line No. item indicates.
4. When you add numerical text to Line No. 85 and click Save, you will receive the following extension screen requesting an explanation of Other. You have space for 500 characters. If you have more than a one count in the Other field, add an explanation as shown in the example below.

5. After you have typed your numbers in the appropriate fields, click Save. You will return to the annual report screen.

6. If you wish to exit this screen and return to it later, click Close. You will be asked if you want to close without saving. Click OK.
Section L – Postpartum Transfer of Care – Mother, Urgent/Emergency

1. Click the section title or Update L link.

   ![Section L Instructions](image)

   Lines 86-94: For each reason listed, enter the number of clients who, during the postpartum period, were transferred to the care of another healthcare provider due to an urgent or emergency situation. Report only the primary reason for each client.

   If there is nothing to report on a specific line, please leave it blank.

   See definition page here.

   ![I have read and understand Section L instructions!](image)

2. Read the instructions and check I have read and understand Section L instructions! The following screen will be available to you:

   ![Reasons Table](image)

   3. If you have No Data to Report, click this button. You will return to the report screen. Otherwise, click in the blank fields in the Total # column to type your numbers where appropriate and as the Line No. item indicates.
4. When you add numerical text to Line No. 94 and click **Save**, you will receive the following extension screen requesting an explanation of **Other**. You have space for 500 characters. If you have more than a one count in the **Other** field, add an explanation as shown in the example below.

5. After you have typed your numbers in the appropriate fields, click **Save**. You will return to the annual report screen.

6. If you wish to exit this screen and return to it later, click **Close**. You will be asked if you want to close without saving. Click **OK**.
Section M – Transfer of Care – Infant, Elective/Non-Emergency

1. Click the **SECTION M – TRANSFER OF CARE – INFANT, ELECTIVE/NON-EMERGENCY** section title or **Update M** link.

2. Read the instructions and check **I have read and understand Section M instructions!** The following screen will be available to you:

   ![Section M Instructions](image)

3. If you have **No Data to Report**, click this button. You will return to the report screen. Otherwise, click in the blank fields in the **Total #** column to type your numbers where appropriate and as the **Line No.** item indicates.

4. If you wish to exit this screen and return to it later, click **Close**. You will be asked if you want to close without saving. Click **Ok**.
5. When you add numerical text to Line No. 102 and click Save, you will receive the following extension screen requesting an explanation of Other. You have space for 500 characters. If you have more than a one count in the Other field, add an explanation as shown in the example below.

6. After you have typed your numbers in the appropriate fields, click Save. You will return to the annual report screen.

7. When you add numerical text to Line No. 102 and click Save, you will receive the following extension screen requesting an explanation of Other. You have space for 500 characters. If you have more than a one count in the Other field, add an explanation as shown in the example above.
Section N – Transfer of Care – Infant, Urgent/Emergency

1. Click the **SECTION N – TRANSFER OF CARE - INFANT, URGENT/EMERGENCY** section title or the **Update N** link.

![Section N instructions](image)

2. Read the instructions and check the **I have read and understand Section N instructions!** box. The following screen will be available to you:

![Section N instructions screen](image)

3. If you have **No Data to Report**, click this button. You will return to the report screen. Otherwise, click in the blank fields in the **Total #** column to type your numbers where appropriate and as the **Line No.** item indicates.
4. When you add numerical text to **Line No. 115** and click **Save**, you will receive the following extension screen requesting an explanation of **Other**. You have space for 500 characters. If you have more than a one count in the **Other** field, add an explanation as shown in the example below.

![Extension Screen](image)

5. After you have typed your numbers in the appropriate fields, click **Save**. You will return to the annual report screen.

6. If you wish to exit this screen and return to it later, click **Close**. You will be asked if you want to close without saving. Click **OK**.
Section O – Birth Outcomes after Transfer of Care

1. Click the **SECTION O – BIRTH OUTCOMES AFTER TRANSFER OF CARE** section title or the **Update O** link.

![Image of Section O Instructions]

**Section O Instructions:**

Lines 116-131: For any mother or infant with transfer of care reported in section I, J, K, L, M and N, from the licensed midwife to another healthcare provider, please provide the outcome information regarding both the mother and for the infant in the spaces provided.

If there is nothing to report on a specific line, please leave it blank.

See definition page here.

2. Read the instructions and check **I have read and understand Section O instructions!**. The following screen will be available to you:

![Image of Section O Table]
3. If you have [No Data to Report], click this button. You will return to the main report screen. Otherwise, click in the blank fields in the A and B columns to type your numbers where appropriate and as the [Line No.] item indicates.

4. When you add numerical text to the fields in columns A and B for the **Mother** and/or **Infant** in the following example, you will be requested to explain each number.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>120</td>
<td>Unknown</td>
<td>05</td>
</tr>
<tr>
<td>121</td>
<td>Information not obtainable</td>
<td>06</td>
</tr>
<tr>
<td>122</td>
<td>Other</td>
<td>07</td>
</tr>
</tbody>
</table>

5. After you have typed your numbers in the appropriate fields for the **Mother** and/or **Infant** screens and clicked [Save], you will receive the following extension screen requesting an explanation. You have space for 500 characters in each field. Remember that each time you add a number in any of these fields in the above example, you will be requested to add an explanation as shown below.

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>120</td>
<td>Unknown</td>
<td>05</td>
</tr>
<tr>
<td>121</td>
<td>Information not obtainable</td>
<td>06</td>
</tr>
<tr>
<td>122</td>
<td>Other</td>
<td>07</td>
</tr>
</tbody>
</table>

   **Explain Unknown (O5) (500 chars max)**

   1) Unknown Reason One 2) Unknown Reason Two

   **Explain No Info. (O6) (500 chars max)**

   <Enter reason why information was not obtainable>

   **Explain Other (O7) (500 chars max)**

   <Enter the other reason>

   **Explain Unknown (O12) (500 chars max)**

   <Enter why the reason is unknown>

   **Explain No Info. (O13) (500 chars max)**

   <Enter reason why information was not obtainable>

   **Explain Other (O14) (500 chars max)**

   <Enter the other reason>

   If you have more than one case reported under reasons which require an explanation, separate explanations with numbering. For example: 1) Explanation One 2) Explanation Two 3) Explanation Three.

6. After you have typed your numbers in the appropriate fields, click [Save]. You will return to the annual report screen.

7. If you wish to exit this screen and return to it later, click [Close]. You will be asked if you want to close without saving. Click [Ok].
Section P – Complications Leading to Maternal and/or Infant Mortality

Note: Only complete Section P if you reported instances of infant or maternal deaths in previous sections!

1. Click the Section P – Complications Leading to Maternal and/or Infant Mortality section title or the Update P link.
2. Read the instructions and check ☐ I have read and understand Section P instructions! The following screen will be available to you:

<table>
<thead>
<tr>
<th>Line No.</th>
<th>Complication</th>
<th>Out-of-Hospital (A)</th>
<th>After Transfer (B)</th>
<th>Total # from (A) and (B) (C)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>MOTHER</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>132</td>
<td>Blood loss</td>
<td>P8</td>
<td></td>
<td>P1</td>
</tr>
<tr>
<td>133</td>
<td>Sepsis</td>
<td>P9</td>
<td></td>
<td>P2</td>
</tr>
<tr>
<td>134</td>
<td>Eclampsia/toxemia or HELLP syndrome</td>
<td>P10</td>
<td>P17</td>
<td>P3</td>
</tr>
<tr>
<td>135</td>
<td>Embolism (pulmonary or amniotic fluid)</td>
<td>P11</td>
<td>P18</td>
<td>P4</td>
</tr>
<tr>
<td>136</td>
<td>Unknown</td>
<td>P12</td>
<td>P19</td>
<td>P5</td>
</tr>
<tr>
<td>137</td>
<td>Information not obtainable</td>
<td>P13</td>
<td>P20</td>
<td>P6</td>
</tr>
<tr>
<td>138</td>
<td>Other</td>
<td>P14</td>
<td>P21</td>
<td>P7</td>
</tr>
<tr>
<td></td>
<td><strong>INFANT</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>139</td>
<td>Anomaly incompatible with life</td>
<td>P30</td>
<td>P38</td>
<td>P22</td>
</tr>
<tr>
<td>140</td>
<td>Infection</td>
<td>P31</td>
<td>P39</td>
<td>P23</td>
</tr>
<tr>
<td>141</td>
<td>Meconium aspiration, other respiratory</td>
<td>P32</td>
<td>P40</td>
<td>P24</td>
</tr>
<tr>
<td>142</td>
<td>Neurological issues/seizures</td>
<td>P33</td>
<td>P41</td>
<td>P25</td>
</tr>
<tr>
<td>143</td>
<td>Other medical issue</td>
<td>P34</td>
<td>P42</td>
<td>P26</td>
</tr>
<tr>
<td>144</td>
<td>Unknown</td>
<td>P35</td>
<td>P43</td>
<td>P27</td>
</tr>
<tr>
<td>145</td>
<td>Information not obtainable</td>
<td>P36</td>
<td>P44</td>
<td>P28</td>
</tr>
<tr>
<td>146</td>
<td>Other</td>
<td>P37</td>
<td>P45</td>
<td>P29</td>
</tr>
</tbody>
</table>

3. If you have ☐ No Data to Report, click this button. You will return to the report screen. Otherwise, click in the blank fields in the A and B columns to type your numbers where appropriate and as the **Line No.** item indicates. Column C will total automatically.
4. When you add numerical text to the fields in columns A and B for the **Mother** and/or **Infant** in the following example, you will be requested to explain each number.

<table>
<thead>
<tr>
<th></th>
<th>Unknown</th>
<th>P12</th>
<th></th>
<th>P19</th>
<th></th>
<th>P5</th>
</tr>
</thead>
<tbody>
<tr>
<td>136</td>
<td>Information not obtainable</td>
<td>P13</td>
<td></td>
<td>P20</td>
<td></td>
<td>P6</td>
</tr>
<tr>
<td>138</td>
<td>Other</td>
<td>P14</td>
<td></td>
<td>P21</td>
<td></td>
<td>P7</td>
</tr>
</tbody>
</table>

5. After you have typed your numbers in the appropriate fields for the **Mother** and/or **Infant** screens and clicked **Save**, you will receive the following pop-up for either the **Mother** and/or **Infant**. Click the **Close** button.

Do NOT include a report of a infant death in Section P unless:

The baby was born alive -- spontaneous heartbeat and respirations - OR cardio-pulmonary resuscitation at the time of delivery resulted in a heartbeat and baby was admitted to special care nursery or had surgery performed

The baby subsequently died within six (6) weeks of its birth as a result of the complication you indicated

**Note - this section is not designed to report or include fetal demise or stillbirths**

6. You will receive the following extension screen requesting an explanation. You have space for 500 characters in each field. Remember that each time you add a number in any of these fields in the above example, you will be requested to add an explanation as shown below.

7. After you have typed your numbers in the appropriate fields, click **Save**. You will return to the annual report screen.

8. If you wish to exit this screen and return to it later, click **Close**. You will be asked if you want to close without saving. Click **OK**

Section P is the final section; there are no more sections to complete once Section P is finished. If you wish to edit a section, may click on the section title to return to that section.
Optional Feedback

You may send comments regarding the LMAR application when you submit your annual report by clicking on the optional feedback item located at the bottom of your annual report screen. Click here to provide comments.

1. Click the Click here to provide comments link at the bottom of the main report menu. The following screen will be available to you:

2. Click the Add button. Notice the Section Z instructions. Read these instructions for specifics on adding and deleting your entries.

3. Click the down arrow for the Section/Category and select the appropriate section.

4. Enter your comments.

5. To add more comments, click the Add button again and repeat steps 3 and 4.

6. Click the Save button when you are finished.
Final Submission Review

This page allows for you to review all the information you entered in previous sections. Please take this opportunity to verify your responses to each section and make any changes if necessary. Your report **HAS NOT** been submitted to OSHPD at this point.

To make changes:

1. Scroll down to the bottom of the **Final Submission Review** page.
2. Click the **Make Corrections** button, and you will be returned to the main report screen.
3. Click on the section title to enter that section and make adjustments.
4. When you are finished, click the **Verified/Submit** to return to the Final Submission Review page.
Submitting Your Report to OSHPD

First, verify that all your report information is correct. Once you submit your report you will not be able to modify your responses.

To submit your report:

1. From the Final Submission Review page, scroll to the bottom and click on the Verified/Submit button.
2. You will be prompted one final time to verify that you are ready to submit your report.
3. Click the Cancel button to return to your report.
4. Click OK to submit your final report to OSHPD. No additional edits will be allowed for this report year.
5. A confirmation window will appear notifying you that OSHPD has received your report.
6. Click OK to the confirmation window.
7. You will be returned to the “My Report” screen. Please note that the Date Submitted column will display a submission date and time.

My Report

<table>
<thead>
<tr>
<th>Reporting Year</th>
<th>Report Status</th>
<th>Service Provided</th>
<th>Date Submitted</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013</td>
<td>Complete</td>
<td>Yes</td>
<td>10/8/2014 3:37:16 PM</td>
</tr>
<tr>
<td>2011</td>
<td>Incomplete</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

View Report
Viewing and Printing Your Submitted Report

1. If you wish to view your report again, click View Report from the “My Report” screen.

2. The date and time you submitted the report is on the top line, and the date and time you printed the report is on the next line.

To Print and/or Save Your Report:

1. Click the Print button to print your report to your local printer.
2. Click the Save button to save your report.

Logout

Click the Logout menu option located at the top of your screen to exit from the LMAR application.