

## MIDWIFERY PROGRAM

### Transfer of Planned Out-of-Hospital Delivery to Hospital Reporting Form

<b>Hospital Reporting Forms Received</b>	<b>FY 17/18 Q1</b>	<b>FY 17/18 Q2</b>	<b>FY 17/18 Q3</b>	<b>FY 17/18 Q4</b>	<b>FY 17/18 Total</b>
Licensed Midwife	45	28			73
Certified Nurse-Midwife	0	0			0
Unlicensed/unknown	1	0			1

<b>Hospital Reporting Forms Received</b>	<b>FY 16/17 Total</b>	<b>FY 15/16 Total</b>
Licensed Midwife	199	140
Certified Nurse-Midwife	10	7
Unlicensed/unknown	2	2