

CALIFORNIA LICENSED MIDWIFE ANNUAL REPORT

Summary

as of 7/12/2018 8:36:55 AM

SECTION A - Submission Summary

Number of Midwives Expected to Report	449
Number Reported	398
Number Unreported	51
Note: Report Field Numbers 1 through 10 are specific to each midwife report submitted and are not included in this aggregation.	

SECTION B - REPORTING PERIOD

Line No.	Report Year
11	2017

SECTION C - SERVICES PROVIDED IN CALIFORNIA - This report should reflect services provided in California only.

Line No.		Total # Yes	Total # No
12	Did you or a student midwife supervised by you perform midwife services in the State of California during the year when the intended place of birth at the onset of your care was an out-of-hospital setting?	260	138

SECTION D - CLIENT SERVICES

Line No.		Total #
13	Total number of clients served as primary caregiver during this calendar year.	5932
14	Number of clients who left care for a non-medical reason. (DO NOT include these clients in any further categories on this report)	258
15	Total number of clients served whose births were still pending on the last day of this reporting year.	1363
16	Enter the number of clients served who also received collaborative care. IMPORTANT: SEE DEFINITION OF COLLABORATIVE CARE!	2665
17	Enter the number of clients served under the supervision of a licensed physician and surgeon. IMPORTANT: SEE DEFINITION OF SUPERVISION!	228

SECTION E - OUTCOMES PER COUNTY IN WHICH BIRTH, FETAL DEMISE, OR INFANT OR MATERNAL DEATH OCCURRED

(A1) County Code	(A2) County Name	(B) # of Live Births	(C) # of Cases Fetal Demise	(D) # of Infant Deaths	(E) # of Maternal Deaths	(A1) County Code	(A2) County Name	(B) # of Live Births	(C) # of Cases Fetal Demise	(D) # of Infant Deaths	(E) # of Maternal Deaths
01	ALAMEDA	373	2	0	0	30	ORANGE	154	1	1	0
02	ALPINE	0	0	0	0	31	PLACER	43	0	0	0
03	AMADOR	1	0	0	0	32	PLUMAS	2	0	0	0
04	BUTTE	22	1	0	0	33	RIVERSIDE	152	1	0	0
05	CALAVERAS	7	0	0	0	34	SACRAMENTO	113	0	0	0
06	COLUSA	2	0	0	0	35	SAN BENITO	2	0	0	0
07	CONTRA COSTA	41	0	0	0	36	SAN BERNARDINO	174	1	0	0
08	DEL NORTE	3	0	0	0	37	SAN DIEGO	270	1	0	0
09	EL DORADO	30	0	0	0	38	SAN FRANCISCO	121	1	0	0
10	FRESNO	48	0	0	0	39	SAN JOAQUIN	16	0	0	0
11	GLENN	1	0	0	0	40	SAN LUIS OBISPO	33	0	0	0
12	HUMBOLDT	65	0	0	0	41	SAN MATEO	49	0	0	0
13	IMPERIAL	0	0	0	0	42	SANTA BARBARA	139	1	0	0
14	INYO	0	0	0	0	43	SANTA CLARA	113	1	0	0
15	KERN	51	0	0	0	44	SANTA CRUZ	82	1	0	0
16	KINGS	0	0	0	0	45	SHASTA	92	0	0	0
17	LAKE	4	0	0	0	46	SIERRA	1	0	0	0
18	LASSEN	5	0	0	0	47	SISKIYOU	24	0	0	0
19	LOS ANGELES	450	2	0	0	48	SOLANO	23	0	0	0
20	MADERA	2	0	0	0	49	SONOMA	80	0	0	0
21	MARIN	41	0	0	0	50	STANISLAUS	37	0	0	0
22	MARIPOSA	2	0	0	0	51	SUTTER	3	0	0	0
23	MENDOCINO	100	0	0	0	52	TEHAMA	4	0	0	0
24	MERCED	7	1	0	0	53	TRINITY	1	0	0	0
25	MODOC	0	0	0	0	54	TULARE	3	0	0	0
26	MONO	2	0	0	0	55	TUOLUMNE	48	1	0	0
27	MONTEREY	26	0	0	0	56	VENTURA	99	1	0	0
28	NAPA	10	0	0	0	57	YOLO	11	0	0	0
29	NEVADA	72	0	1	0	58	YUBA	15	0	0	0

SECTION F - OUTCOMES OF OUT-OF-HOSPITAL BIRTHS

Line No.		Total #
19	Number of planned out-of-hospital births at the onset of labor	3981
20	Number of completed births in an out-of-hospital setting	3297
21	Breech deliveries	12
22	Successful VBAC's	152
23	Twins both delivered out-of-hospital	0
24	Higher Order Multiples - all delivered out-of-hospital	0

SECTION G - ANTEPARTUM TRANSFER OF CARE, ELECTIVE/NON-EMERGENCY

Line No.	Code	Reason	Total #
25	G1	Medical or mental health conditions <i>unrelated</i> to pregnancy	13
26	G2	Hypertension developed in pregnancy	43
27	G3	Blood coagulation disorders, including phlebitis	3
28	G4	Anemia	8
29	G5	Persistent vomiting with dehydration	3
30	G6	Nutritional & weight loss issues, failure to gain weight	1
31	G7	Gestational diabetes	10
32	G8	Vaginal bleeding	9
33	G9	Suspected or known placental anomalies or implantation abnormalities	12
34	G10	Loss of pregnancy (includes spontaneous and elective abortion)	96
35	G11	HIV test positive	0
36	G12	Suspected intrauterine growth restriction, suspected macrosomia	10
37	G12.1	Fetal anomalies	16
38	G13	Abnormal amniotic fluid volumes; oligohydramnios or polyhydramnios	33
39	G14	Fetal heart irregularities	6
40	G15	Non vertex lie at term	40
41	G16	Multiple gestation	22
42	G17	Clinical judgment of the midwife (where a single other condition above does not apply)	26
43	G18	Client request	60
44	G19	Other	54

SECTION H – ANTEPARTUM TRANSFER OF CARE, URGENT/EMERGENCY

Line No.	Code	Reason	Total #
45	H1	Non pregnancy-related medical condition	6
46	H2	Severe or persistent headache, pregnancy-induced hypertension (PIH), or preeclampsia	19
47	H3	Isoimmunization, severe anemia, or other blood related issues	1
48	H4	Significant infection	1
49	H5	Significant vaginal bleeding	6
50	H6	Preterm labor or preterm rupture of membranes	56
51	H7	Marked decrease in fetal movement, abnormal fetal heart tones, non-reassuring non-stress test (NST)	9
52	H8	Fetal demise	7
53	H9	Clinical judgment of the midwife (where a single other condition above does not apply)	4
54	H10	Other	2

SECTION I – INTRAPARTUM TRANSFER OF CARE, ELECTIVE/NON-EMERGENCY

Line No.	Code	Reason	Total #
55	I1	Persistent hypertension; severe or persistent headache	16
56	I2	Active herpes lesion	3
57	I3	Abnormal bleeding	2
58	I4	Signs of infection	5
59	I5	Prolonged rupture of membranes	51
60	I6	Lack of progress; maternal exhaustion; dehydration	284
61	I7	Thick meconium in the absence of fetal distress	30
62	I8	Non-vertex presentation	18
63	I9	Unstable lie or mal-position of the vertex	9
64	I10	Multiple gestation (NO BABIES DELIVERED PRIOR TO TRANSFER)	1
65	I11	Clinical judgment of the midwife (where a single other condition above does not apply)	17
66	I12	Client request; request for medical methods of pain relief	75
67	I13	Other	10

SECTION J – INTRAPARTUM TRANSFER OF CARE, URGENT/EMERGENCY

Line No.	Code	Reason	Total #
68	J1	Suspected preeclampsia, eclampsia, seizures	3
69	J2	Significant vaginal bleeding; suspected placental abruption; severe abdominal pain inconsistent with normal labor	5
70	J3	Suspected uterine rupture	2
71	J4	Maternal shock, loss of consciousness	1
72	J5	Prolapsed umbilical cord	0
73	J6	Non-reassuring fetal heart tones and/or signs or symptoms of fetal distress	50
74	J7	Clinical judgment of the midwife (where a single other condition above does not apply)	9
75	J8	Other life threatening conditions or symptoms	0
76	J9	Multiple gestation (AT LEAST ONE BABY HAS BEEN DELIVERED OUT-OF-HOSPITAL)	0

SECTION K – POSTPARTUM TRANSFER OF CARE - MOTHER, ELECTIVE/NON-EMERGENCY

Line No.	Code	Reason	Total #
77	K1	Adherent or retained placenta without significant bleeding	14
78	K2	Repair of laceration beyond level of midwife's expertise	27
79	K3	Postpartum depression	2
80	K4	Social, emotional or physical conditions outside of scope of practice	0
81	K5	Excessive or prolonged bleeding in later postpartum period	10
82	K6	Signs of infection	7
83	K7	Clinical judgment of the midwife (where a single other condition above does not apply)	2
84	K8	Client request	1
85	K9	Other	6

SECTION L – POSTPARTUM TRANSFER OF CARE - MOTHER, URGENT/EMERGENCY

Line No.	Code	Reason	Total #
86	L1	Abnormal or unstable vital signs	2
87	L2	Uterine inversion, rupture or prolapse	2
88	L3	Uncontrolled hemorrhage	12
89	L4	Seizures or unconsciousness, shock	2
90	L5	Adherent or retained placenta with significant bleeding	16
91	L6	Suspected postpartum psychosis	1
92	L7	Signs of significant infection	2
93	L8	Clinical judgment of the midwife (where a single other condition above does not apply)	1
94	L9	Other	3

SECTION M – TRANSFER OF CARE - INFANT, ELECTIVE/NON-EMERGENCY

Line No.	Code	Reason	Total #
95	M1	Low birth weight	2
96	M2	Congenital anomalies	8
97	M2.1	Birth injury	0
98	M3	Poor transition to extrauterine life	7
99	M4	Insufficient passage of urine or meconium	0
100	M5	Parental request	1
101	M6	Clinical judgment of the midwife (where a single other condition above does not apply)	7
102	M7	Other	6

SECTION N – TRANSFER OF CARE - INFANT, URGENT/EMERGENCY

Line No.	Code	Reason	Total #
103	N1	Abnormal vital signs or color, poor tone, lethargy, no interest in nursing	16
104	N2	Signs or symptoms of infection	6
105	N3	Abnormal cry, seizures or loss of consciousness	0
106	N4	Significant jaundice at birth or within 30 hours	2
107	N5	Evidence of clinically significant prematurity	1
108	N6	Congenital anomalies	3
109	N6.1	Birth injury	0
110	N7	Significant dehydration or depression of fontanelles	0
111	N8	Significant cardiac or respiratory issues	21
112	N9	Ten minute APGAR score of six (6) or less	4
113	N10	Abnormal bulging of fontanelles	0
114	N11	Clinical judgment of the midwife (where a single other condition above does not apply)	1
115	N12	Other	2

SECTION O – BIRTH OUTCOMES AFTER TRANSFER OF CARE

		(A)		(B)	
Line No.	Reason	Total # of Vaginal Births		Total # of Caesarean Deliveries	
MOTHER		Code		Code	
116	Without complication	O1	682	O8	304
117	With serious pregnancy/birth related medical complications resolved by 6 weeks	O2	17	O9	13
118	With serious pregnancy/birth related medical complications <u>not</u> resolved by 6 weeks	O3	3	O10	1
119	Death of mother	O4	0	O11	0
120	Unknown	O5	3	O12	1
121	Information not obtainable	O6	2	O13	0
122	Other	O7	1	O14	1
INFANT					
123	Healthy live born infant	O15	647	O24	252
124	With serious pregnancy/birth related medical complications resolved by 4 weeks	O16	26	O25	4
125	With serious pregnancy/birth related medical complications <u>not</u> resolved by 4 weeks	O17	10	O26	12
126	Fetal demise diagnosed prior to labor	O18	6	O27	0
127	Fetal demise diagnosed during labor or at delivery	O19	4	O28	3
128	Live born infant who subsequently died	O20	3	O29	2
129	Unknown	O21	3	O30	0
130	Information not obtainable	O22	2	O31	0
131	Other	O23	10	O32	0

SECTION P – COMPLICATIONS LEADING TO MATERNAL AND/OR INFANT MORTALITY

COMPLICATIONS LEADING TO MATERNAL AND/OR INFANT MORTALITY							
Line No.	Complication	Out-of-Hospital (A)		After Transfer (B)		Total # from (A) and (B) (C)	
MOTHER		Code		Code		Code	
132	Blood loss	P8	0	P15	0	P1	0
133	Sepsis	P9	0	P16	0	P2	0
134	Eclampsia/toxemia or HELLP syndrome	P10	0	P17	0	P3	0
135	Embolism (pulmonary or amniotic fluid)	P11	0	P18	0	P4	0
136	Unknown	P12	0	P19	0	P5	0
137	Information not obtainable	P13	0	P20	0	P6	0
138	Other	P14	0	P21	0	P7	0
INFANT							
139	Anomaly incompatible with life	P30	0	P38	2	P22	2
140	Infection	P31	1	P39	0	P23	1
141	Meconium aspiration, other respiratory	P32	0	P40	0	P24	0
142	Neurological issues/seizures	P33	0	P41	2	P25	2
143	Other medical issue	P34	0	P42	0	P26	0
144	Unknown	P35	0	P43	1	P27	1
145		P36	0	P44	0	P28	0

	Information not obtainable						
146	Other	P37	1	P45	0	P29	1

LICENSED MIDWIFE ANNUAL REPORT SUMMARY
Multi-Year Comparison

Section A - Submission Summary						
	2017	2016	2015	2014	2013	2012
Number of midwives expected to report	449	412	394	363	330	311
Number Reported	398	364	343	316	259	272
Number Unreported	51	48	51	47	71	39

Section C - Services Provided in California						
Did you or a student midwife supervised by you perform midwife services in the State of California during the year when the intended place of birth at the onset of your care was an out-of-hospital setting?	Total # Yes					
	2017	2016	2015	2014	2013	2012
	260	239	237	220	191	189
	Total # No					
	2017	2016	2015	2014	2013	2012
	138	125	106	96	68	83

Section D - Client Services						
	2017	2016	2015	2014	2013	2012
Number of clients served as primary caregiver during the calendar year	5932	5420	5528	5386	5052	4370
Number of clients who left care for a non-medical reason	258	246	337	256	222	175
Number of clients served whose births were still pending on the last day of the reporting year	1363	1265	1342	1282	1345	1193
Number of clients served who also received collaborative care	2665	2480	2562	2763	2720	2532
Number of clients served under the supervision of a licensed physician and surgeon	228	171	112	161	444	296

Section E - Total Outcomes in which Birth, Fetal Demise, or Infant or Maternal Death Occurred						
	2017	2016	2015	2014	2013	2012
Number of live births	3269	3071	3233	3285	2813	2547
Number of cases of fetal demise	16	10	8	14	10	6
Number of infant deaths	2	3	0	2	3	0
Number of maternal deaths	0	0	0	0	0	0

Section F - Outcomes of Out-of-Hospital Births						
	2017	2016	2015	2014	2013	2012
Number of planned out-of-hospital births at the onset of labor	3981	3664	3616	3397	3028	2784
Number of completed births in an out-of-hospital setting	3297	3018	3082	2833	2559	2316
Breech deliveries	12	11	12	12	20	13
Successful VBAC's	152	159	172	150	109	118
Twins both delivered out-of-hospital	0	1	0	1	6	4
Higher order multiples - all delivered out-of-hospital	0	6	0	1	0	1

LICENSED MIDWIFE ANNUAL REPORT SUMMARY

Multi-Year Comparison

Section G - Antepartum Transfer of Care, Elective/Non-Emergency						
Reason	2017	2016	2015	2014	2013	2012
Medical or mental health conditions <i>unrelated</i> to pregnancy	13	13	16	12	5	5
Hypertension developed in pregnancy	43	44	45	40	27	27
Blood coagulation disorders, including phlebitis	3	5	1	5	7	2
Anemia	8	4	2	6	1	2
Persistent vomiting with dehydration	3	2	3	3	2	0
Nutritional and weight loss issues, failure to gain weight	1	1	1	1	0	0
Gestational diabetes	10	14	9	10	8	9
Vaginal bleeding	9	4	6	4	5	2
Suspected or known placental anomalies or implantation abnormalities	12	8	14	10	9	8
Loss of pregnancy (includes spontaneous and elective abortion)	96	53	60	67	55	50
HIV test positive	0	0	0	1	0	0
Suspected intrauterine growth restriction, suspected macrosomia	10	16	12	12	4	8
Fetal anomalies	16	10	5	5	9	10
Abnormal amniotic fluid volumes; oligohydramnios or polyhydramnios	33	14	17	15	21	9
Fetal heart irregularities	6	7	8	2	9	6
Non vertex lie at term	40	43	45	43	33	43
Multiple gestation	22	20	18	8	16	10
Clinical judgment of the midwife (where a single other condition above does not apply)	26	33	26	35	43	16
Client request	60	65	48	48	28	40
Other	54	51	70	74	26	22
Total	465	407	406	401	308	269

Section H - Antepartum Transfer of Care, Urgent/Emergency						
Reason	2017	2016	2015	2014	2013	2012
Non pregnancy-related medical condition	6	1	17	21	0	2
Severe or persistent headache, pregnancy-induced hypertension (PIH), or preeclampsia	19	25	24	16	16	13
Isoimmunization, severe anemia, or other blood related issues	1	1	1	2	1	1
Significant infection	1	2	0	0	1	1
Significant vaginal bleeding	6	5	11	2	5	3
Preterm labor or preterm rupture of membranes	56	60	38	47	44	44
Marked decrease in fetal movement, abnormal fetal heart tones, non-reassuring non-stress test (NST)	9	10	6	12	8	6
Fetal demise	7	5	5	7	5	2
Clinical judgment of the midwife (where a single other condition above does not apply)	4	3	5	1	4	2
Other	2	5	7	5	5	2
Total	111	117	114	113	89	76

LICENSED MIDWIFE ANNUAL REPORT SUMMARY

Multi-Year Comparison

Section I - Intrapartum Transfer of Care, Elective/Non-Emergency						
Reason	2017	2016	2015	2014	2013	2012
Persistent hypertension; severe or persistent headache	16	16	9	11	6	8
Active herpes lesion	3	2	0	0	0	0
Abnormal bleeding	2	2	2	5	5	3
Signs of infection	5	5	8	5	7	7
Prolonged rupture of membranes	51	52	31	41	38	27
Lack of progress; maternal exhaustion; dehydration	284	255	231	260	231	248
Thick meconium in the absence of fetal distress	30	18	16	22	20	23
Non-vertex presentation	18	13	18	16	16	11
Unstable lie or mal-position of the vertex	9	6	6	6	7	6
Multiple gestation (NO BABIES DELIVERED PRIOR TO TRANSFER)	1	0	1	0	0	1
Clinical judgment of the midwife (where a single other condition above does not apply)	17	17	29	41	11	11
Client request; request for medical methods of pain relief	75	73	71	70	50	46
Other	10	8	11	15	7	6
Total	521	467	433	492	398	397

Section J - Intrapartum Transfer of Care, Urgent/Emergency						
Reason	2017	2016	2015	2014	2013	2012
Suspected preeclampsia, eclampsia, seizures	3	2	3	4	2	5
Significant vaginal bleeding; suspected placental abruption; severe abdominal pain inconsistent with normal labor	5	7	5	5	3	3
Suspected uterine rupture	2	0	1	2	0	0
Maternal shock, loss of consciousness	1	1	0	0	0	0
Prolapsed umbilical cord	0	2	2	1	1	1
Non-reassuring fetal heart tones and/or signs or symptoms of fetal distress	50	61	30	45	41	32
Clinical judgment of the midwife (where a single other condition above does not apply)	9	2	1	10	10	3
Other life threatening conditions or symptoms	0	3	2	2	0	0
Multiple gestation (AT LEAST ONE BABY HAS BEEN DELIVERED OUT-OF-HOSPITAL)	0	0	1	0	1	0
Total	70	78	45	69	58	44

Section K - Postpartum Transfer of Care - Mother, Elective/Non-Emergency						
Reason	2017	2016	2015	2014	2013	2012
Adherent or retained placenta without significant bleeding	14	17	20	14	7	11
Repair of laceration beyond level of midwife's expertise	27	19	22	20	16	14
Postpartum depression	2	1	4	1	1	3
Social, emotional or physical conditions outside of scope of practice	0	4	0	1	1	1
Excessive or prolonged bleeding in later postpartum period	10	7	7	5	11	4
Signs of infection	7	7	1	7	1	1
Clinical judgment of the midwife (where a single other condition above does not apply)	2	2	1	3	2	1
Client request	1	3	8	1	2	1
Other	6	3	2	5	0	2
Total	69	63	65	57	41	38

LICENSED MIDWIFE ANNUAL REPORT SUMMARY

Multi-Year Comparison

Section L - Postpartum Transfer of Care - Mother, Urgent/Emergency						
Reason	2017	2016	2015	2014	2013	2012
Abnormal or unstable vital signs	2	5	4	4	7	5
Uterine inversion, rupture or prolapse	2	1	2	1	0	0
Uncontrolled hemorrhage	12	9	11	8	9	5
Seizures or unconsciousness, shock	2	0	4	2	2	0
Adherent or retained placenta with significant bleeding	16	14	21	17	15	11
Suspected postpartum psychosis	1	0	0	1	1	0
Signs of significant infection	2	2	4	2	1	0
Clinical judgment of the midwife (where a single other condition above does not apply)	1	2	5	2	3	0
Other	3	1	5	0	4	0
Total	41	34	56	37	42	21

Section M - Transfer of Care - Infant, Elective/Non-Emergency						
Reason	2017	2016	2015	2014	2013	2012
Low birth weight	2	1	3	1	3	0
Congenital anomalies	8	3	2	4	3	5
Birth injury	0	0	0	0	1	0
Poor transition to extrauterine life	7	15	10	13	11	13
Insufficient passage of urine or meconium	0	0	0	0	0	1
Parental request	1	12	0	2	1	2
Clinical judgment of the midwife (where a single other condition above does not apply)	7	8	6	7	16	5
Other	6	0	4	4	2	3
Total	31	39	25	31	37	29

Section N - Transfer of Care - Infant, Urgent/Emergency						
Reason	2017	2016	2015	2014	2013	2012
Abnormal vital signs or color, poor tone, lethargy, no interest in nursing	16	15	13	11	8	8
Signs or symptoms of infection	6	4	4	8	1	2
Abnormal cry, seizures or loss of consciousness	0	0	0	2	1	0
Significant jaundice at birth or within 30 hours	2	0	3	2	1	0
Evidence of clinically significant prematurity	1	0	0	0	2	1
Congenital anomalies	3	3	3	2	1	0
Birth injury	0	0	0	0	0	1
Significant dehydration or depression of fontanelles	0	0	0	0	0	0
Significant cardiac or respiratory issues	21	18	22	9	10	10
Ten minute APGAR score of six (6) or less	4	2	3	3	2	0
Abnormal bulging of fontanelles	0	0	0	0	0	0
Clinical judgment of the midwife (where a single other condition above does not apply)	1	1	4	0	1	3
Other	2	5	2	2	5	1
Total	56	48	54	39	32	26

LICENSED MIDWIFE ANNUAL REPORT SUMMARY

Multi-Year Comparison

Section O - Birth Outcomes After Transfer of Care						
Total # of Vaginal Births - Mother						
Reason	2017	2016	2015	2014	2013	2012
Without complication	682	621	594	592	393	433
With serious pregnancy/birth related medical complications resolved by 6 weeks	17	15	10	15	12	7
With serious pregnancy/birth related medical complications not resolved by 6 weeks	3	2	1	2	2	2
Death of mother	0	0	0	0	0	0
Unknown	3	0	4	3	1	9
Information not obtainable	2	1	0	4	0	0
Other	1	2	0	3	2	2
Total	708	641	609	619	410	453

Total # of Vaginal Births - Infant						
Reason	2017	2016	2015	2014	2013	2012
Healthy live born infant	647	614	561	611	333	411
With serious pregnancy/birth related medical complications resolved by 4 weeks	26	19	20	19	16	13
With serious pregnancy/birth related medical complications not resolved by 4 weeks	10	9	4	4	5	3
Fetal demise diagnosed prior to labor	6	2	3	5	2	1
Fetal demise diagnosed during labor or at delivery	4	5	3	2	2	2
Live born infant who subsequently died	3	4	1	1	9	2
Unknown	3	1	0	4	44	3
Information not obtainable	2	2	0	2	43	6
Other	10	2	5	5	3	3
Total	711	658	597	653	457	444

Total # of Caesarean Deliveries - Mother						
Reason	2017	2016	2015	2014	2013	2012
Without complication	304	251	238	267	258	196
With serious pregnancy/birth related medical complications resolved by 6 weeks	13	14	16	8	12	5
With serious pregnancy/birth related medical complications not resolved by 6 weeks	1	2	0	0	0	0
Death of mother	0	0	1	0	0	0
Unknown	1	0	0	0	0	0
Information not obtainable	0	1	0	0	0	0
Other	1	1	1	0	0	0
Total	320	269	256	275	270	201

LICENSED MIDWIFE ANNUAL REPORT SUMMARY

Multi-Year Comparison

Section O - Birth Outcomes After Transfer of Care (continued)						
Total # of Caesarean Deliveries - Infant						
Reason	2017	2016	2015	2014	2013	2012
Healthy live born infant	252	204	212	231	217	162
With serious pregnancy/birth related medical complications resolved by 4 weeks	4	5	3	2	7	7
With serious pregnancy/birth related medical complications not resolved by 4 weeks	12	11	3	4	4	2
Fetal demise diagnosed prior to labor	0	1	0	0	0	0
Fetal demise diagnosed during labor or at delivery	3	2	1	3	1	1
Live born infant who subsequently died	2	1	1	1	1	0
Unknown	0	0	0	0	0	0
Information not obtainable	0	1	0	0	0	0
Other	0	0	1	0	1	0
Total	273	225	221	241	231	172

Section P - Complications Leading to Maternal and/or Infant Mortality						
Out-of-Hospital - Mother						
Complication	2017	2016	2015	2014	2013	2012
Blood loss	0	0	0	0	0	0
Sepsis	0	0	0	0	0	0
Eclampsia/toxemia or HELLP syndrome	0	0	0	0	0	0
Embolism (pulmonary or amniotic fluid)	0	0	0	0	0	0
Unknown	0	0	0	0	0	0
Information not obtainable	0	0	0	0	0	0
Other	0	0	0	0	0	0
Total	0	0	0	0	0	0

Out-of-Hospital - Infant						
Complication	2017	2016	2015	2014	2013	2012
Anomaly incompatible with life	0	0	0	1	3	0
Infection	1	0	0	0	0	0
Meconium aspiration, other respiratory	0	0	0	0	0	0
Neurological issues/seizures	0	0	0	0	0	0
Other medical issue	0	1	0	1	0	0
Unknown	0	1	0	0	0	0
Information not obtainable	0	0	0	0	0	0
Other	1	1	0	0	0	0
Total	2	3	0	2	3	0

LICENSED MIDWIFE ANNUAL REPORT SUMMARY

Multi-Year Comparison

Section P - Complications Leading to Maternal and/or Infant Mortality (continued)						
After Transfer - Mother						
Complication	2017	2016	2015	2014	2013	2012
Blood loss	0	0	0	0	0	0
Sepsis	0	0	0	0	0	0
Eclampsia/toxemia or HELLP syndrome	0	0	0	0	0	0
Embolism (pulmonary or amniotic fluid)	0	0	1	0	0	0
Unknown	0	0	0	0	0	0
Information not obtainable	0	0	0	0	0	0
Other	0	0	0	0	0	0
Total	0	0	1	0	0	0

After Transfer - Infant						
Complication	2017	2016	2015	2014	2013	2012
Anomaly incompatible with life	2	3	1	1	5	1
Infection	0	0	0	0	1	0
Meconium aspiration, other respiratory	0	0	0	1	0	0
Neurological issues/seizures	2	0	0	0	0	0
Other medical issue	0	1	0	0	2	0
Unknown	1	0	0	0	0	1
Information not obtainable	0	1	0	0	0	0
Other	1	0	1	0	2	0
Total	6	5	2	2	10	2