

## Gates Traditional Midwifery Services Emergency Care Plan

Name of client \_\_\_\_\_

Pregnancy , labor and birth are normal and natural events , but there are times when an emergent situations can arise. Emergency situations, even with a healthy woman with a low risk birth, can arise without warning signs or symptoms. For these reasons impurities that if you have any questions or concerns that you communicate clearly with me. I will also communicate with you any concerns that I have during the entire time I am caring for you. Additional, please know that if at any time during your pregnancy, labor, birth or the postpartum period you choose to transfer care to a Physician and/or hospital , I will respect your decision and assist you in the transition.

During labor, in an event of a situation that is life threatening to you or your baby, 91 Emergency line will be called and a request for Emergency Medical Services (EMS) will be initiated. I will continue to care for you and your baby with all of the knowledge and equipment/medication that I am able to use. Your situation will be communicated with the EMS, the receiving hospital and/or doctor to the best of our ability in the situation. I will attempt to stay by your side during the transport and in the hospital to facilitate a smooth transition of care.

In your area, the fire department and/or ambulance service that will likely respond is

\_\_\_\_\_  
Please indicate if you have CalStar and give their number

It is expected that in a life threatening situation , that you and/or your baby will be transported to the closest hospital which is:

Hospital \_\_\_\_\_ Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Doctor \_\_\_\_\_ Phone \_\_\_\_\_

Client \_\_\_\_\_  
Printed Signature

Other parent \_\_\_\_\_  
Printed Signature

Clients address \_\_\_\_\_ Unit \_\_\_\_\_

Mile marker (if rural)

City \_\_\_\_\_ Zip code \_\_\_\_\_ Phone \_\_\_\_\_

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