



## **CERTIFIED NURSE-MIDWIFE PRACTICE**

### **Explanation of Standardized Procedure for CNM**

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This paper describes requirements for Certified Nurse-Midwives (CNMs) to legally perform functions that are considered the practice of medicine through the mechanism of standardized procedures.

Standardized Procedures are authorized in the Business and Professions Code, Nursing Practice Act (NPA) Section 2725 and further clarified in California Code of Regulations (CCR 1474). Standardized Procedures are the legal mechanism for registered nurses, and thus authorize CNMs to perform functions that would otherwise be considered the practice of medicine. Standardized Procedures must be developed collaboratively by nursing, medicine, and administration in the organized health care system where they will be utilized.

Organized health care system means a health facility that is not licensed pursuant to Chapter 2 of the California Health and Safety Code and includes clinics, home health agencies, physician's offices and public or community health services. Standardized Procedures means policies and protocols formulated by organized health care systems for the performance of standardized procedure functions.

#### **Certified Nurse-Midwife Scope of Practice**

#### **California Code of Regulation: § Section 1463**

The scope of nurse-midwifery practice:

- (a) Provides necessary supervision, care, and advice in a variety of settings including women during the antepartal, intrapartal, postpartal, interconceptional periods, and with family planning needs.
- (b) Conducting deliveries on his or her own responsibilities and caring for the newborn and the infant. This care includes preventive measures and the detection of abnormal conditions in the mother and child.
- (c) Obtaining physician assistance and consultation when indicated.
- (d) Providing emergency care until physician assistance can be obtained.
- (e) Other practices and procedures may be included which the nurse-midwife and the supervising physician deem appropriate by using the standardized procedures as specified in Section 2725 of the Code.

#### **Medical Practice Act**

Business and Professions Code a Medical Practice Act authorizes physicians to diagnose mental and physical conditions, to use drugs in or upon human beings, to sever or penetrate the tissues of human beings and to use other methods in the treatment of diseases, injuries, deformities, or other physical or mental conditions. As a general guide, the performance of any of these by a CNM requires a standardized procedure.

## **CNMs Performing Medical Functions**

The means designated to authorize performance of a medical function by a registered nurse is a standardized procedure developed through collaboration among registered nurses, physicians and administrators in the organized health care system in which it is to be used. In facilities regulated by Title 22, the CNM performing the standardized procedures must be approved through the Interdisciplinary Practice Committee before the CNM is authorized to legally perform these functions.

When the CNM overlaps into the practice of medicine, a standardized procedure must be adhered to. The following is a brief explanation of each of the functions.

- **Medical Diagnosis**

The Legislature, in granting the CNM a scope of practice, recognized that nurse-midwifery practice is the independent management “of women during the antepartal, intrapartal, postpartal, interconceptional periods,” including family planning needs, and caring for the newborn and the infant. When CNMs diagnose conditions unrelated to CNM scope of practice, a standardized procedure is required.

- **Severing and Penetrating tissue**

The NPA clearly states “the practice of nurse-midwifery does not include the assisting of childbirth by any artificial, forcible, or mechanical means, nor the performance of any version.” The Board’s interpretation of this statute is that CNMs are not to perform vacuum extractions or use any mechanical means during childbirth. When CNMs assist in cesarean surgery, perform circumcision, perform episiotomies, or repair lacerations of the perineum, a standardized procedure is required.

- **Furnishing drugs and devices, including controlled substances**

The drugs and devices furnished or ordered by a certified nurse-midwife must be in accordance with standardized procedures or protocols. If Schedule II or III controlled substances are furnished or ordered by a certified nurse-midwife, the controlled substance shall be furnished or ordered in accordance with patient-specific protocol approved by the treating or supervising physician and surgeon.

## **GUIDELINES FOR DEVELOPING STANDARDIZED PROCEDURES**

Standardized Procedures are not subject to prior approval by the boards that regulate nursing and medicine; however, they must be developed according to the following guidelines which were jointly promulgated by the Board of Registered Nursing and the Medical Board of California. (Board of Registered Nursing, Title 16, California Code of Regulations (CCR) Section 1474; Medical Board of California, Title 16, CCR Section 1379.)

- (a) Standardized Procedures shall include a written description of the method used in developing and approving them and any revision thereof.
- (b) Each standardized procedure shall:
  - (1) Be in writing, dated, and signed by the organized health care system personnel authorized to approve it.
  - (2) Specify which standardized procedure functions registered nurses may perform and under what circumstances.

- (3) State any specific requirements that are to be followed by registered nurses in performing particular standardized procedure functions.
- (4) Specify any experience, training and/or educational requirements for performance of standardized procedure functions.
- (5) Establish a method for initial and continuing evaluation of the competence of those registered nurses authorized to perform standardized procedure functions.
- (6) Provide for a method of maintaining a written record of those persons authorized to perform standardized procedure functions.
- (7) Specify the scope of supervision required for performance of standardized procedure functions. (ie: telephone contact with the physician).
- (8) Set forth any specialized circumstances under which the registered nurse is to immediately communicate with a patient's physician concerning the patient's condition.
- (9) State the limitations on settings, if any, in which standardized procedure functions may be performed.
- (10) Specify patient record keeping requirements.
- (11) Provide for a method of periodic review of the standardized procedures.

An additional safeguard for the consumer is provided by steps four and five of the guidelines that together form a requirement that the CNM be currently capable to perform the procedure. If a CNM undertakes a procedure without the competence to do so, such an act may constitute incompetence and the CNM would be subject to discipline by the Board of Registered Nursing.

**GUIDELINES FOR DEVELOPING STANDARDIZED PROCEDURES FOR FURNISHING DRUGS OR DEVICES: Business and Professions Code: Nurse-midwives § 2746.51 (2), (3), (4)**

The standardized procedure covering the furnishing or ordering of drugs and devices shall specify all of the following:

- (A) Which certified nurse-midwife nurse midwife may furnish or order drugs and devices.
- (B) Which drugs and devices may be furnished or ordered and under what circumstances.
- (C) The extent of physician and surgeon supervision.
- (D) The method of periodic review of the certified nurse-midwife's competence, including peer review, and review of the provisions of the standardized procedure.

If Schedule II or III controlled substances are furnished or ordered by a certified nurse-midwife, the controlled substance shall be furnished or ordered in accordance with patient-specific protocol approved by the treating or supervising physician and surgeon. For Schedule II controlled substance protocols, the provision for furnishing the Schedule II controlled substance shall address the diagnosis of illness, injury, or condition for which the Schedule II controlled substance is to be furnished.

The furnishing or ordering of drugs and devices by a certified nurse-midwife occurs under physician and surgeon supervision. For purposes of this section, no physician and surgeon shall supervise more than four certified nurse-midwives at one time. Physician and surgeon supervision shall not be construed to require the physical presence of the physician but does include all of the following:

- (A) Collaboration on the development of the standardized procedures and protocols.
- (B) Approval of the standardized procedure or protocol.
- (C) Available by telephone contact at the time of patient examination by the certified nurse-midwife.