

**MONTANA BOARD OF ALTERNATIVE HEALTH CARE**  
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**BOARD-APPROVED INFORMED CONSENT FORM – DIRECT ENTRY MIDWIFERY**

Licensed Direct-Entry Midwives (LDEM) in the State of Montana follow Montana regulations in Title 37, Chapter 27 of the Montana Code Annotated. Prior to accepting a woman into care, a Licensed Direct-Entry Midwife shall first obtain written informed consent per MCA 37-27-311.

The practice of Licensed Direct-Entry Midwifery (LDEM) does not constitute the practice of Medicine, certified nurse-midwifery, or emergency medical care to the extent that a licensed direct-entry midwife advises, attends, or assists a woman during pregnancy, labor, natural childbirth, or the postpartum periods when the pregnancy is not a high risk pregnancy.

Except as otherwise provided by law, parents have a right to give birth where and with whom they choose in the state of Montana.

Licensed Direct-Entry Midwives (LDEM) are required to file Birth Certificates and follow recommended Blood screening tests for Mother and Newborn baby.

Licensed Direct-Entry Midwives are not required by law to carry Malpractice insurance.

The complete rules and regulations can be found on the Board website at [www.althealth.mt.gov](http://www.althealth.mt.gov).

Enclosed you will find, in the LDEM's own words, Informed Consent for Midwifery Care. Please initial each of the following sections as you have read and understood the following:

\* the LDEM's educational background, the nature and scope of the care to be given including the possibility of and procedure for transport of the patient to a hospital. \_\_\_\_\_

\* the available alternatives to LDEM's care. \_\_\_\_\_

\* a description of the risks of home birth, primarily those conditions that may arise during delivery. \_\_\_\_\_

\* the fact that you, the patient, have been advised to consult with a physician at least twice during your pregnancy. \_\_\_\_\_

\* whether midwifery services to be provided are located more than 50 miles from the nearest hospital. \_\_\_\_\_

\* that a health care provider's liability in rendering care or assistance in good faith to a patient of a LDEM in an emergency situation is limited to damages caused by gross negligence or by willful or wanton acts or omissions. \_\_\_\_\_

Additional information may be attached/included.

Patient/Client Signature \_\_\_\_\_ Date \_\_\_\_\_

LDEM Signature \_\_\_\_\_ Date \_\_\_\_\_

License #: \_\_\_\_\_