

**Course Title: MOD5-MW340-Postpartum Provision of Care****Credits:** 1.00

**Course Description:** This course covers management of the immediate and 2- to 6-week postpartum period, including: delivery of the placenta, estimation and management of blood loss, response to hemorrhage, care and treatment of 1<sup>st</sup> and 2<sup>nd</sup> degree tears, treatment of shock, continual assessment of maternal well-being, assisting mother to initiate and persist in breast feeding, treatment of breast engorgement, thrush, and mastitis, facilitation of the attachment and bonding between infant and parents, and management of pain, perineal sutures, constipation, and hemorrhoids. The student learns the provision of education, guidance and support to mother and family.

**Learning Objectives:**

A: Student will be able to answer the Study Questions (below).

B: Student will be able to demonstrate thorough knowledge of the Clinical Skills required for this course (below).

C: Student will demonstrate thorough knowledge of the MANA Core Competencies for Midwives required for this course (below).

D: Student will be able to demonstrate knowledge of any new information in the area of study.

**Learning Activities:**

I. Student Reads required texts.

II. Student Completes study questions.

III. Preceptor elaborates on study questions.

IV. Clinical Skills and Core Competencies training consists of the following (may take place at clinical visits or at childbirth education classes):

1. Preceptor Explanation of	Safe, evidence-based midwifery care for the individual Clinical Skills and Core Competencies including etiology, sequelae, appropriate management and follow-up for the individual patient, appropriate times and reasons for consult and referral, access to relevant resources and information, complete, thorough and timely record keeping, appropriate, professional, and compassionate management of every task involved, receptiveness and responsiveness to patient's concerns. The Explanation will include a discussion of midwifery decisions and actions as they relate to possible outcomes and their wider impact, based on the Midwives Model of Care®.
2. Preceptor Demonstration of	
3. Student Practice of	
4. Student Demonstration of	

V. Student researches and presents to the preceptor relevant latest

developments in academic and clinical midwifery as relevant to the subject.

VI. Student/Preceptor discussion.

VII. Role-playing and Clinical Interactions: practice clinical interactions, assist with actual clinicals.

**Learning Materials / Resources:**

(Please use textbooks less than 5 years old, or most recent edition)

1. Frye, Anne. Holistic Midwifery: A Comprehensive Textbook for Midwives in Homebirth Practice, Vol. 2: Care of the Mother and Baby from the Onset of Labor Through the First Hours After Birth. Labrys Press. 2004.
2. Weaver, Pam and Evans, Sharon K. Practical Skills Guide for Midwifery, 4<sup>th</sup> Edition. Morningstar Publishing Co. Wasilla. 2007.
3. MEAC Abbreviated NARM Skills Form.
4. MANA Core Competencies for Midwives
5. Midwives Model of Care®.
6. Internet links as needed for latest developments in midwifery care:  
[The Cochrane Collaboration](#)  
[EBSCO](#)  
[National Library of Medicine](#)  
[PubMed](#)  
[Medline](#)  
[SCIRUS](#)  
[Medscape](#)  
[World Health Organization](#)

### **Evaluation Tools / Methods:**

1. Answers to study questions: Student must achieve at least 80% correct to pass. The preceptor evaluates each answer for correctness and explains the questions that were incorrect. This counts for 85% of the final grade.
2. Clinical Skills: Student must demonstrate thorough knowledge of each skill. This counts for 5% of the final grade. *Academic courses CAN be completed without the student achieving "mastery" of each skill, however the skills on the MEAC Abbreviated NARM Skills Form (which is a separate requirement) are not filled in until the student achieves Mastery\* of the skill.*
3. MANA Core Competencies: Student's ability to apply MANA Core Competencies for Midwives in discussion to simulated and real-life situations. This counts for 5% of the final grade.

Evaluation of NARM Skills and MANA Core Competencies: The student demonstrates thorough knowledge to the satisfaction of the preceptor in the following areas:

*\*The student will be able to, in accordance with safe, evidence-based midwifery care, explain the condition, verbalize etiology and sequelae, verbalize appropriate management for the individual patient, follow up appropriately, consult and refer appropriately, access resources and information, accomplish complete, thorough and timely record keeping, appropriately manage every task involved correctly, professionally, and compassionately, while being receptive and responsive to patient's concerns. She/he will be able to explain her decisions and actions as they relate to possible outcomes and their wider impact.*

4. Student presentation of new information in area of study. The preceptor evaluates the correctness of the information presented. This counts for 5% of the grade.

### **Study Questions**

1. Describe how you will implement the Midwives Model of Care during postpartum care.

2. Give the rationale for continuous evaluation of the postpartum woman's well-being. How is this carried out?
3. Give the rationale for assisting the postpartum woman with breast-feeding and how this is carried out.
4. Give the rationale for facilitating the postpartum woman's parenting and how this is carried out.
5. Discuss what anticipatory guidance and instructions should be given postpartum, why, and what the rationale is for each.
6. Discuss what continual screening for complications is carried out and what the rationale is.
7. Describe how the early puerperium is managed. Give the rationale for each step.
8. Explain how the first 2 weeks to 6 weeks postpartum are managed. Give the rationale for each step.
9. Discuss how relief for postpartal cramps is affected. Give the rationale for each.
10. Discuss the management of excessive perspiration and why.
11. Discuss the management of breast engorgement. Give the rationale for each step.
12. Explain how good breast support is affected and what the rationale is.
13. Name the steps for successful breast-feeding and relief measures for common problems. Give the rationale for each.
14. Discuss the management of pain of perineal sutures and why.
15. Discuss the management of constipation postpartum and what is the rationale.
16. Discuss the management of hemorrhoids and what is the rationale.
17. Discuss how attachment and bonding between infant and parents are facilitated and what the rationale is:
  - a. During the prenatal period
  - b. During birth and immediately following birth.

- c. During the postpartal and early caretaking period.
- d. During rooming in.

18. Describe the teaching in the immediate postpartum that should be given to each postpartum woman depending on her need before discharge in regards to taking care of herself, taking care of her baby, and taking care of the rest of her family. Give the rationale for each.

## Clinical Skills (NARM Skills)

### **I. Midwifery Counseling, Education and Communication**

- (1)-I A. Provides interactive support and counseling and/or referral services to the mother regarding her relationships with her significant others and other healthcare providers
- (2)-I B. Provides education, support, counseling and/or referral for the possibility of less-than-optimal pregnancy outcomes
- (3)-I C. Provides education and counseling based on maternal health/reproductive/family history and on-going risk assessment
- (5)-I E. Educates the mother and her family/support unit to share responsibility for optimal pregnancy outcome
- (6)-I F. Educates the mother concerning the natural physical and emotional processes of pregnancy, labor, birth and postpartum
- (7)-I G. Applies the principles of informed consent
- (8)-I H. Provides individualized care
- (9)-I I. Advocates for the mother during pregnancy, birth and postpartum
- I J. Provides education, counseling and/or referral, where appropriate for:
  - (10)-I J 1. Genetic counseling for at-risk mothers
  - (11)-I J 2. Abuse issues: emotional, physical and sexual
  - (13)-I J 4. Diet, nutrition and supplements
  - (14)-I J 5. Effects of smoking, drugs and alcohol use
  - (15)-I J 6. Situations requiring an immediate call to the midwife
  - (16)-I J 7. Sexually transmitted diseases
  - (17)-I J 8. Complications
  - (18)-I J 9. Environmental risk factors
  - (19)-I J 10. Newborn care including normal/abnormal newborn activity, responses, vital signs, appearance, behavior, etc
  - (20)-I J 11. Postpartum care concerning complications and self-care

### **II. General Healthcare Skills**

- (21)-II A. Demonstrates Universal Precautions
- (22)-II B. Demonstrates the application of OSHA regulations as they relate to midwifery workplace
- (23)-II C. Demonstrates the application of aseptic technique
- II D. Demonstrates the use of instruments and equipment including:
  - (26)-II D 3. Blood pressure cuff
  - (32)-II D 9. Hemostats
  - (37)-II D 14. Needle and syringe
  - (38)-II D 15. Scissors (all kinds)
  - (39)-II D 16. Single dose ampule

- (41)-II D 18. Stethoscope
- (42)-II D 19. Suturing equipment
- (44)-II D 21. Thermometer
- (47)-II D 24. Vacutainer/blood collection tube

### **V. Postpartum**

- (131)-V A. Performs postpartum reevaluation of mother and baby at appropriate intervals
- (132)-V B. Completes the birth certificate
- (133)-V C. Provides contraceptive education and counseling
- (134)-V D. Assesses for and treats jaundice
- (135)-V E. Provides direction for care of circumcised and uncircumcised penis
- (136)-V \*F. Performs thorough and appropriate maternal four- to six-week postpartum check-up
- (137)-V G. Knows treatments for sore nipples
- (138)-V H. Knows treatments for mastitis
- (139)-V I. Knows breastfeeding referral resources

## Core Competencies (MANA Core Competencies for Midwives)

### **I. Guiding Principles of Practice.**

#### **The midwife provides care according to the following principles:**

- 1 A. Midwives work in partnership with women and their chosen support community throughout the care giving relationship.
- 1 B. Midwives respect the dignity, rights and the ability of the women they serve to act responsibly throughout the care giving relationship.
- 1 C. Midwives work as autonomous practitioners, collaborating with other health and social service providers when necessary.
- 1 D. Midwives understand that physical, emotional, psychosocial and spiritual factors synergistically comprise the health of individuals and affect the childbearing process.
- 1 F. Midwives understand that the childbearing experience is primarily a personal, social and community event.
- 1 G. Midwives recognize that a woman is the only direct care provider for herself and her unborn baby; thus the most important determinant of a healthy pregnancy is the mother herself.
- 1 H. Midwives recognize the empowerment inherent in the childbearing experience and strive to support women to make informed decisions and take responsibility for their own well-being.
- 1 J. Midwives synthesize clinical observations, theoretical knowledge, intuitive assessment and spiritual awareness as components of a competent decision making process.
- 1 K. Midwives value continuity of care throughout the childbearing cycle and strive to maintain continuous care within realistic limits.
- 1 L. Midwives understand that the parameters of “normal” vary widely and recognize that each pregnancy and birth is unique.

## **II. General Knowledge and Skills**

**The midwife provides care incorporating certain concepts, skills and knowledge from a variety of health and social sciences including, but not limited to:**

- 2 C. Community standards of care for women and their developing infants during the childbearing cycle, including midwifery and bio-technical medical standards and the rationale for and limitations of such standards
- 2 M. The ability to develop, implement and evaluate an individualized plan for midwifery care.
- 2 N. Woman-centered care, including the relationship between the mother, infant and their larger support community.
- 2 O. Knowledge and application of various health care modalities as they apply to the childbearing cycle

## **IV. Care During Labor, Birth and Immediately Thereafter**

**The midwife provides health care, support, and information to women throughout labor, birth and the hours immediately thereafter. She determines the need for consultation or referral as appropriate. The midwife uses a foundation of knowledge and/or skill which includes the following:**

- 4 D. Emotional responses and their impact during labor, birth and immediately thereafter.
- 4 E. Comfort and support measures during labor, birth and immediately thereafter.
- 4 H. Fluid and nutritional requirements during labor, birth and immediately thereafter.
- 4 I. Assessment of and support for maternal rest and sleep as appropriate during the process of labor, birth and immediately thereafter.
- 4 J. Causes of, evaluation of and appropriate treatment for variations which occur during the course of labor, birth and immediately thereafter.

## **V. Postpartum Care**

**The entry-level midwife provides health care, support and information to women throughout the postpartum period. She determines the need for consultation or referral as appropriate. The midwife uses a foundation of knowledge and/or skill, which includes, but is not limited, the following:**

- 5 A. Anatomy and physiology of the mother during the postpartum period.
- 5 B. Lactation support and appropriate breast care including evaluation of, identification of and treatments for problems with nursing.
- 5 C. Parameters and methods for evaluating and promoting maternal well-being during the postpartum period.
- 5 D. Causes of, evaluation of, and treatment for maternal discomforts during the postpartum period.
- 5 E. Emotional, psychosocial and sexual variations during the postpartum period. Maternal nutritional requirements during the postpartum period including methods of nutritional evaluation and Counseling.
- 5 F. Causes of, evaluation of, and treatments for problems arising during the postpartum period.

5 G. Support, information and referral for family planning methods, as the individual woman desires.