

148I.4 Board — rules.

1. The board shall adopt rules consistent with [this chapter](#) and [chapter 147](#) which are necessary for the performance of the board's duties. The rules shall do all of the following:

a. Regulate the practice of midwifery based on rules established by the national association of certified professional midwives and the North American registry of midwives or its successor organization.

b. Define professional and unprofessional conduct.

c. Permit a licensee to obtain appropriate screening and testing for clients, including but not limited to laboratory tests and ultrasounds.

d. Permit a licensee to obtain and administer all of the following during the practice of midwifery:

(1) Antihemorrhagic agents including but not limited to oxytocin, misoprostol, and methylergonovine.

(2) Intravenous fluids for stabilization of the laboring person.

(3) Neonatal injectable vitamin K.

(4) Newborn antibiotic eye prophylaxis.

(5) Oxygen.

(6) Intravenous antibiotics for group B streptococcal antibiotic prophylaxis.

(7) Rho (D) immune globulin.

(8) Local anesthetic.

(9) Epinephrine.

(10) Other drugs consistent with the practice of certified professional midwifery, as approved by the board.

e. Permit a licensee to administer a drug prescribed by a licensed health care provider for a client of a licensee.

f. Prohibit a licensee from using forceps or a vacuum extractor.

g. Require a licensee to develop a written plan for the consultation, collaboration, emergency transfer, and transport of the birthing client and newborn when necessary, and to submit that plan to the board.

h. Require a licensee to provide each client with, and maintain a record of, a signed consent form that describes the licensee's qualifications, a copy of the licensee's emergency plan, whether the licensee carries professional liability insurance and a copy of the licensee's professional liability insurance, if any, and the benefits and risks of birth in the client's setting of choice.

i. Require a licensee to report client data to the department of health and human services, the midwives alliance of North America statistics registry, the American association of birth centers perinatal data registry, or other similar databases, and to verify the submission of such data with the board.

j. Adopt continuing education requirements consistent with those required by the North American registry of midwives or its successor organization.

k. Establish requirements for peer review.

l. Require a licensee to file a birth certificate for each birth.

m. Establish an annual license fee.

n. Require a licensee to comply with [sections 136A.5](#) and [136A.5A](#).

2. The board shall not adopt rules that do any of the following:

a. Permit a licensee to order or administer narcotic drugs.

b. Limit the location where a licensee may practice midwifery.

c. Require a licensee to practice under the supervision of or under a collaborative practice agreement with another health care provider.

3. The board shall adopt rules requiring a licensee to consult with a licensed physician or certified nurse midwife according to the appropriate standard of care for high-risk pregnancies and births in the United States. Such rules shall not require an in-hospital birth due merely to a consultation and shall, to the greatest degree medically responsible, allow a licensee to maintain care of a client according to the client's wishes.

[2023 Acts, ch 127, §7](#)