# Health (Notifications by Midwives) Amendment Regulations 2021

### SL 2021/62

Made by the Governor in Executive Council.

#### 1. Citation

These regulations are the *Health (Notifications by Midwives) Amendment Regulations 2021.* 

### 2. Commencement

These regulations come into operation as follows —

- (a) regulations 1 and 2 on the day on which these regulations are published in the *Gazette*;
- (b) the rest of the regulations on 1 July 2021.

## 3. Regulations amended

These regulations amend the *Health (Notifications by Midwives) Regulations 1994*.

#### 4. Schedule amended

In the Schedule delete Form 2 and insert:

# Form 2

[r. 4]

Last name	Unit Record No		Estab
			Ward
	Birth date (Mother)		Marital status
Address of usual residence	82	A	
Number and street !	State	Post rode	Amaparatest Somewast (not. Defects)
		T7 CT	- Engelment
Town or suburb	Height	Weight	Ethnic status of mother
Maiden name	(whole and	(Arfulic Killigram)	1-Caussian 10-Aborigmai not TSI
Email	Telephone		13-75 not Rounghol 13-Abortonal on
interpreter service required Mother's is	anguage		Or Other
(3-yes 2-no) (max	uring interpreter!		
PREGNANCY DETAILS		Vaccinations during a	regnancy:
PREVIOUS PREGNANCES:	(perspect)	If it is the committee of the state of the s	
Total number (excluding this pregnancy):		82 Vacanated during 2	
Pacity (excluding this pregnancy):	اللا	83 Voccinated during 3 84 Voccinated transfer	* renester
Previous pregnancy outcomes:	200	D) Not vaccinated	NAME OF THE SAME
- liveborn, now living		39 Unknown function	
- liveborn, now field	John I	Procedures/treatmen	
stilbon	144		rts (include drugs)
Number of previous caesarsans		2 cervical suture	us bucane audit
Caesarean last delivery 1-yes 2+no	3.3	3 CXS/processal bit	and the same of th
Previous multiple births 1-ees 2-mi		4 arrespondents	
THIS PREGRANCY:		5 ultrament	
Estimated gest wik at 1" antenatal unit		6 CTG anneparture	
Total number of amenutal care visits		7 CTG irreparture	
Date of LMP:	1216		
STATE OF THE STATE	hololidadad	Primary maternity mo	
This date certain 1 yes 2 mm	and the second	intended place of birt	
Expected due date:	2.0	Trhoughal 2-birth centr	
Based on 2 - clinial agree listes	100	3-birth control free stand	
2 = whrenound <20 wite		CONTRACTOR OF THE	LABOUR DETAILS
2 + ultrasound ==20 who		Maternity model of o	
Smoking	C. Terrano	of labour or non-labo	ur caesareur:
Number of tobacco cigarettes usually smoked		Onset of labour:	
each day during first 20 weeks of pregnancy	/	Disportaneous Irindus	
Number of behacce rigarettes usually smoked		Principal resson for in	eduction of labour (if mileral).
each day efter 20 weeks of pregnancy			14
(Enone you 1007, accessmed or smaked < 5 use '90 undetermined use '909')	E.	Augmentation	Induction
		(fabour has begun):	(before labour begunit
Alcohol during pregnancy: Fest 20 who frequency of drinking an	After 20 who	I none	1 none
Frequency of directing an alreshally direct		2nephode	2 mytecin
Connect Me Inditions	and .	2 prortagandre	4 prostagionino
62 - monthly (E) - Also many time		4 artificial rupture	
Number of standard slocked drinks	ampro.	of membranes	€dilatation device i.e. Foley Catheter
number of standard accuses droves on a typical day		2 other	2 untiprogestigen i.e. m/epristone
Was screening for depression/armiety condu-	cted:		8 uther
Layer 2-not affectly 3+declined 3+unker	rest.	Analgesia (during labo	nir)t
Was additional followup indicated for perina	dal .	1 norw	6 Instantic spirids
mental health risk factors?	100	2 Introversité	7continued spinal/epotheral
5 yes 2 yes 7 + not applicable 9 + union	MATE.	4 replace/could	
Was family violence screening conducted:	S #15	5. Iginal	The state of the s
1-yes. 2-rest afforms 1-declared 8-velocour	F 51.5	Duration of labour	to a
Complications of pregnancy:		1" stage (hour & min):	The state of the s
Ithrestened shorton (-Q9wkd)			
2threatened pretern labour (<57wks)		2 <sup>rd</sup> scape (hour & min)	The state of the s
3 urinary tract infection		Postnatal blood lims i	s mla:
4 pre-eclarysia			m (admin purposes only):
5. artepartum Feemorthage (APH) placonte pr	pendi	MICHIEFE	
6 Afrit - placental alexantion		Name	
T AM-other		Signature	
pre-lebour rupture of mendicenes		Dete	2.0
9 gestational diabetes 13 gestational hypertension		fleg. No.	N M/W
	****		
<ol> <li>pre-edempsia superimposed on essettal by site: jugecifyli</li> </ol>	Decreases		
Medical Carditions:			
negacial conditions:	The same of the sa		
A CONTRACTOR OF THE PARTY OF TH			
I essential hypertension 5 type I dials			
1 expertial hypertonoism 5 type 1 disk 2 authors 6 type 2 disk 4 gentlyf harpen 8 orther types	ietes	Complete this Pregn	week form some for each woman giving birth, on

Detier lait name	Use has he I I I I I I I	
BIRTH DETAILS	Born before arrival: Jujes Juno	
Anaesthesia (during delivery):	Birth date: 2 0	
1 none	Birth time: (24hr cluck)	
I local ansesthesia to penneum		
pudendal pudendal	Plurality: (number of bobies this birth)	
epidura/(caudal	Birth order: (specify this body, eg. 1+1" body born, 3+2")	
5 spinal	Presentation:	
general	1-vertex 2-breach 3-face 4-bross 8-other	
combined spinal/epidural	Water birth: Dryes Zinya	
E ather	Method of Noth:	
Complications of labour and birth	1 sportareous	
include the reason for instrument delivery):	2 vacuum successful	
precipitate delivery	5 vacuum unsuccessful	
Petal distress	4 forces successful	
protagsed cord	5 forcess unsuccessful	
cord tight around neck	6 breech/vaginal)	
sephalopelvic disproportion	7 elective caesarean	
retained placenta – manual removal	8 emergency caesarean	
persistent occipita posterior		
shoulder dystocia	Accoucheur(s):	
10 failure to progress <> 3cm	1 abstetricus	
11 failure to progress > 3cm	2other medical officer	
IZ previous csesurean section	3 midwife	
Di ather (specify)	4 student	
Principal reason for Caesaraan Section: (fich one box only)	5 self/no attendent	
fetal compromise	I other	
suspected field macrosomia	Gender: 1-male 2-female 3-indeterminate	
malgresentation		
lack of progress co 5cm	Status of baby at birth: 1-Evelore 2-stillborn (unspecified)	
lack of progress in the 1st stage, 4cm to < 10cm	3-antepartum stilbom 4-intrapartum stilbom	
lack of progress in the 2nd stage	Infant weight: /whole gram)	
placenta pravvia	Langth: (whole cm)	
E placental abruption	Head dircumference: (whole on)	
vaus praevis	Time to establish unassisted regular breathing: /unicle min.	
IO antepartum/intrapartum haemorrhage	Respectation: (Alt methods and)	
II multiple pregnancy	1 none	
[2] unsuccessful attempt at assisted delivery	2 suction	
(3) Junsuccessful induction	3 angen	
4 cord prolapse	4 continuous positive airway pressure (CPAP)	
IS previous cansarean section	6 endstraches intubation	
tii previeus shoulder dystocia	10 Intermittent positive pressure ventilation (PPV)	
17. previous perineal trauma/4 <sup>th</sup> degree tear	11 external cardiac compressions	
IR previous adverse fetal/ineonatal outcome	All other	
19 other obstetric, medical, surgical, psychological	The state of the s	
infications	Appar score: 1 minute	
III maternal choice in the absence of any obstetric,	5 minutes	
medical, surgical, psychological indications	Extimated gestation: (whole weeks)	
Perineal status:	Birth defects: (uprol/y)	
Intact	Birth traume: (specify)	
3 <sup>et</sup> diagree tauc/vaginal tear	The state of the s	
2 <sup>rd</sup> degree tear	BABY SEPARATION DETAILS	
3° degree tour	Separation date: 2 8	
eprostumy	Mode of separation:	
2" dagrae tear	Intransferred Bedied Sedischarged home	
ether	Transferred to:	
	Special care number of days:	
The same same same	(Excludes Level 2: whole days only)	
BABY DETAILS	MIDWIFE	
ABORIGINAL STATUS OF BABY (Tick one box only)	Name	
Aboriginal but not Tomes Strait Islander	Property and the second	
	there are a second of the seco	
2 Torres Strait Islander but not Aboriginal 3 Aboriginal and Torres Strait Islander	Date 2 0	

N. HAGLEY, Clerk of the Executive Council.