

STATE OF MARYLAND
MARYLAND BOARD OF NURSING 4140 PATTERSON AVENUE BALTIMORE, MARYLAND
21215-2254

LICENSURE AS A DIRECT-ENTRY MIDWIFE INFORMATION SHEET

Applicants applying for licensure to practice as a direct-entry midwife in Maryland must submit the following:

1. A copy of a birth certificate or other legal proof of age such as passport or drivers license.
2. A copy of a current valid Certified Professional Midwife credential granted by the North American Registry of Midwives (NARM).
3. A copy of a current cardiopulmonary resuscitation (CPR) certification issued by the American Red Cross or the American Heart Association.
4. A copy of a current neonatal resuscitation (NRP) certification issued by the American Academy of Pediatrics or the American Heart Association.
5. One of the following:
 - a) An official transcript sent directly from a midwifery education program that is accredited by the Midwifery Education Accreditation Council (MEAC) or the Accreditation Commission for Midwifery Education (ACME); OR
 - b) If the applicant was certified by NARM as a certified professional midwife on or before January 15, 2017, through a non-MEAC accredited program, but otherwise qualifies for licensure, the applicant shall provide (see application section 3 part B):
 - i. Evidence of completion, in the past 2 years, of an additional 50 hours of continuing education units approved by the Board and accredited by MEAC, the American College of Nurse Midwives, or the Accrediting Council for Continuing Medical Education, including:
 1. 14 hours of obstetric emergency skills training such as a birth emergency skills training (BEST) or an advanced life saving in obstetrics (ALSO) course; and
 2. The remaining 36 hours shall include courses in pharmacology, lab interpretation of pregnancy, antepartum complications, intrapartum complications, postpartum complications, and neonatal care.
6. \$900.00 non-refundable application processing and initial licensure fee (check or money order) payable to the **Maryland Board of Nursing**.
7. A properly formatted passport-style photograph.
8. A signed copy of the General Written Care Plan for Direct Entry Midwives (form enclosed).
9. A current Criminal History Record Check (CHRC) is REQUIRED to complete your application (form enclosed). Please send a COPY of your receipt of a current CHRC (fingerprints).
10. Complete and sign the application in its entirety.
11. Allow four (4) to six (6) weeks for processing.

Effective January 27, 2012: Please be advised that the disclosure of your Social Security Number or Federal Tax Identification Number is **mandatory** in order to process your application.

Any license or certificate application(s) received at the Maryland Board of Nursing without either a Social Security Number (SSN) or Federal Tax ID Number **WILL NOT** be processed. Applications without these numbers are incomplete.

The Board is required by federal and Maryland law to collect this information for the following purposes:

- Verification of identity with respect to final adverse actions related to your license or certificate (42 U.S.C. § 1320a-7e(b))
- Administration of the Child Support Enforcement Program (Md. Family Law Code Ann., § 10-119.3)
- Identification by the Maryland Department of Assessments and Taxation of new businesses in Maryland (Md. Health Occ. Code Ann., § 1-210)

Please understand that if the Board receives your application, but it is incomplete because there is **NO** Social Security Number or Federal Tax ID Number, your application **WILL NOT** be processed and **WILL BE** returned to you.

INCOMPLETE APPLICATIONS WILL REQUIRE ADDITIONAL PROCESSING TIME.

Once issued, the new Direct-Entry Midwife license verification may be viewed and printed from the Board's website: www.mbon.org --- "Look Up A Licensee"

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**MARYLAND BOARD OF NURSING APPLICATION FOR CERTIFICATION TO
PRACTICE DIRECT-ENTRY MIDWIFERY**

I hereby make application for licensure to practice as a Direct-Entry Midwife in the State of Maryland in accordance with the Maryland Annotated Code, Health Occupations Article, Subtitle 6C and the Regulations Governing the Practice of Direct-Entry Midwives and submit the following evidence of my qualifications for licensure:

Last Name: _____ First _____ MI _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Business Address: _____

NOTICE: PLEASE BE ADVISED THAT IF YOU DO NOT PROVIDE A BUSINESS ADDRESS, THE BOARD IS REQUIRED TO DISCLOSE YOUR HOME ADDRESS IN RESPONSE TO A MARYLAND PUBLIC INFORMATION ACT REQUEST FOR YOUR LICENSURE OR CERTIFICATION RECORDS.

City: _____ State: _____ Zip Code: _____

Home Phone: _____ Work: _____ Cell: _____

Email Address _____

Gender: Circle One: Male Female

Date of Birth: _____ Social Security or Federal Tax ID number: _____
(MM/DD/YYYY)

***Ethnicity:** Are you Hispanic or Latino origin? Circle One: YES NO

***Race:** Multiracial respondents may select all applicable racial categories below:

Circle Choice(s):

American Indian or Alaska Native

Asian

Black or African American

Native Hawaiian or Other Pacific Islander

White / Caucasian

***Authorization: MD Code, State Government, § 10-606 (c)**

SECTION I:

1. CERTIFICATION BY THE NORTH AMERICAN REGISTRY OF MIDWIVES (NARM):

| | |
|---|--|
| NARM CERTIFICATION #: | <i>Submit a copy of your NARM certificate with this application.</i> |
| DATE OF ORIGINAL CERTIFICATION: | |
| EXPIRATION DATE OF CURRENT CERTIFICATE: | |

2. CARDIO PULMONARY RESUSCITATION (CPR) CERTIFICATION issued by the American Red Cross or the American Heart Association and NEONATAL RESUSCITATION CERTIFICATION (NRP) issued by the American Academy of Pediatrics or the American Heart Association:

| | |
|---------------------------------------|--|
| EXPIRATION DATE OF CPR CERTIFICATION: | <i>Submit a copy each of your current CPR and NRP certification cards.</i> |
| EXPIRATION DATE OF NRP CERTIFICATION: | |

3. COMPLETE ONE OF THE FOLLOWING:

- A. Verify completion of a Midwife Education Accreditation Council (MEAC) or Accreditation Commission for Midwifery Education (ACME) accredited midwifery program:

| | |
|---|--|
| SCHOOL NAME: | <i>Have official transcript sent by the school directly to the Board to verify completion.</i> |
| DATE OF COMPLETION: | |
| PROGRAM TYPE (circle one): MEAC or ACME | |

- B. If the applicant was certified as a Certified Professional Midwife prior to January 15, 2017, evidence of completion, in the past 2 years, of an additional 50 hours of continuing education units from the Board-approved list (see Appendix A), including:

1. 14 hours of obstetric emergency skills training such as a birth emergency skills training (BEST) or an advanced life saving in obstetrics (ALSO) course; and
2. The remaining 36 hours shall include courses in pharmacology, lab interpretation of pregnancy, antepartum complications, intrapartum complications, postpartum complications, and neonatal care.

| BOARD-APPROVED CEU COURSE (see Appendix A) (attach additional pages if necessary) | DATE | NUMBER OF HOURS | <i>Submit evidence of completion of each CEU course listed.</i> |
|---|------|-----------------|---|
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| | | | |
| TOTAL HOURS: | | | |

SECTION II:

1. HIGH SCHOOL DIPLOMA OR EQUIVALENT:

| |
|-------------------------------|
| HIGH SCHOOL: |
| STREET ADDRESS: |
| CITY, STATE, ZIP CODE: |
| YEAR OF COMPLETION: |

NOTICE: THE BOARD OF NURSING HAS THE RIGHT TO REQUEST PROOF OF HIGH SCHOOL DIPLOMA OR EQUIVALENT. RANDOM AUDITS OF THIS INFORMATION ARE UNDERTAKEN.

2. HIGHEST LEVEL OF EDUCATION:

- High School (required)**
- Some college courses**
- Associates degree: School name** _____
City, State _____ **Year completed** _____
Degree earned: _____
- Bachelor's degree: School name** _____
City, State _____ **Year completed** _____
Degree earned: _____
- Master's degree: School name** _____
City, State _____ **Year completed** _____
Degree earned: _____
- Doctorate: School name** _____
City, State _____ **Year completed** _____
Degree earned: _____
- Other: School name** _____
City, State _____ **Year completed** _____
Degree earned: _____

SECTION III:

BACKGROUND:

1. Have you ever pled guilty, nolo contendere (*i.e.*, “no contest”), been convicted of, or received probation before judgment for any criminal act (excluding minor traffic violations)?
 Yes No

2. Have you ever been convicted of or pled guilty, in any civil, administrative or criminal proceeding to the possession, use, manufacture, distribution, or diversion of controlled substances or prescription drugs?
 Yes No

3. Have you ever had any application, license, certificate, permit or other privilege to practice any health care occupation:
 - a. Denied?
 Yes No

 - b. Disciplined, including, but not limited to, reprimand, censure, fine, surrender, probation, suspension, or revocation?
 Yes No

4. With respect to any application, license, certificate, permit or other privilege to practice any health care occupation, have you ever been placed in a non-disciplinary probation, monitoring, practice remediation, or other similar program?
 Yes No

If you answered “Yes” to any of the questions above you must submit the following:

For Questions 1 and 2

- a. A detailed letter of explanation, including the circumstances leading to your conviction, the date of your conviction, the crime for which you were convicted (*i.e.*, DUI, DWI, theft, etc.), your sentence, and if and when you completed your sentence; **AND**

- b. Certified copies of court documents regarding the facts and circumstances of the crime, including the actual conviction, sentence, and current status of sentence (*i.e.*, all fines paid in full, completion letter from Parole/Probation Officer, etc.) or a letter/form from the court indicating that no records are available. Examples of court

documents that show facts and circumstances of the crime include statement of probable cause/facts, arrest affidavit, or plea agreement.

For Questions 3 and 4

- a. A detailed letter of explanation; **AND**
- b. Official copies of any documentation, including disciplinary orders, issued by a regulatory body regarding the denial or discipline of any application, license, certificate or other privilege to practice any health care occupation, or any documentation regarding non-disciplinary probation, monitoring, practice remediation, or other similar program.

SECTION IV:

PRINT THE NAME YOU WOULD LIKE TO APPEAR ON YOUR LICENSE:

THE DIRECT-ENTRY MIDWIFE WILL PRACTICE ACCORDING TO THE SCOPE AND STANDARDS DEFINED BY LAW AND REGULATION IN MARYLAND AND BY THE NORTH AMERICAN REGISTRY OF MIDWIVES (NARM):

I _____ hereby declare and affirm that all information
(print name)
contained in this form is true and complete to the best of my knowledge, information, and belief. I understand that I must submit a general written care plan in accordance with the Maryland Board of Nursing's requirements of section 8-6C-08 before I begin my practice in Maryland as a Licensed Direct-Entry Midwife. I agree to submit an annual data report as required under Section 8-6C-10. (Providing false or misleading information may result in disciplinary action by the Board.)

ORIGINAL SIGNATURE: _____ DATE SIGNED: _____

PLEASE ATTACH AND SUBMIT YOUR APPLICATION FEE: \$900.00 non-refundable application processing and initial licensure fee must be in check or money order form, payable to the MARYLAND BOARD OF NURSING.

PLEASE ATTACH A PROPERLY-FORMATTED PASSPORT-STYLE PHOTOGRAPH OF THE APPLICANT HERE:



**MAIL TO:
DIRECT-ENTRY MIDWIFERY DEPARTMENT
MARYLAND BOARD OF NURSING
4140 PATTERSON AVENUE BALTIMORE, MD 21215-2254**

Revised: April 2016

General Written Care Plan for Direct-Entry Midwives

Plan for transfer and transport of a client, newborn, or both:

The midwife agrees to the following:

Each individual client will have a transfer plan that will specify the closest hospital for use in an emergency transfer, as well as the preferred hospital for transfer in a non-emergent transfer. If the client has a preferred hospital provider for use in case of a non-emergent transfer this will also be specified in the plan.

The midwife agrees to take the following steps in an emergency transfer of the client and/or newborn:

1. Call 911.
2. Arrange for transport of the client/newborn to the closest hospital.
3. Call the receiving health care provider and inform them of the incoming transport.
4. Accompany the client to the hospital.
5. Complete the standard transfer form which is given to the receiving provider.
6. On arrival at the hospital provide the complete medical record for the client.
7. Provide a verbal report to the receiving provider about the care provided so far.

The midwife agrees to take the following steps in a non-emergency transfer of the client and/or newborn. A non-emergency transfer is one in which the client is stable and no immediate care is needed:

1. Select a preferred hospital for transfer based on client preference.
2. Call the receiving health care provider and inform them of the incoming transport.
3. Transport the client by private vehicle if it is safe to do so, or by ambulance if necessary.
4. Accompany the client to the hospital.
5. Complete the standard transfer form which is given to the receiving provider.
6. On arrival at the hospital provide the complete medical record for the client.
7. Provide a verbal report to the receiving provider about the care provided so far.

Midwife Name (Printed): _____

Midwife Signature: _____ Date: _____

Appendix A: Board-approved continuing education courses

Obstetric Emergency Skills Trainings

- **Birth Emergency Skills Training for Out-of-Hospital Providers® (BEST)** is a certification course that prepares out-of-hospital midwives, physicians, nurses, and birth assistants to manage obstetrical emergencies with greater confidence and proficiency. The two-day course includes one 6-hour and one 8 hour day. The class includes didactic information, learning activities, hands on practice, and case studies, as well as trauma management and pregnancy complications scenarios. The BEST course includes a systematic approach to:
 - Recognizing the high-risk pregnancy
 - Pain and bleeding in pregnancy
 - Complications arising in pregnancy
 - Managing Complications of Birth
 - Postpartum Emergencies
 - Neonatal Emergencies
- **Advanced Life Support in Obstetrics (ALSO®)** by AAFP is an evidence-based multidisciplinary training program that prepares maternity health care providers to better manage obstetric emergencies. ALSO's evidence-based learning path bridges knowledge gaps and boosts skill sets using a team-based approach, hands-on training, and mnemonics to reduce errors and save lives. Two-day course including methods of managing pregnancy and birth emergencies, and demonstration of content and skill acquisition by successful completion of the course written exam and megadelivery testing station.

Maryland Complete Bridge Program Course

- **Expect the Unexpected: Midwives Handling Complications in Out-of-hospital Settings** (36 hours, MEAC accredited) Specially designed by leading midwifery educators in collaboration with the Association of Independent Midwives of Maryland (AIMM), and accredited by MEAC, this four day intensive seminar gives interactive and hands-on training for midwives on successfully handling complications in the antepartum, intrapartum, postpartum and newborn periods, including pharmacology, laboratory testing, and working collaboratively to optimize home to hospital transports. Participants will prepare for the unexpected by being trained to anticipate complications and react swiftly and decisively, using role playing with clinical models. Instruction will build learner's complex competencies in psycho-motor skills, communication and clinical decision making skills plus evidence-based knowledge needed to perform these skills. Structured Objective Clinical Evaluations (OSCE) stations will be utilized for skills acquisition and verification simulation models, and written tests will cement learning.

Pharmacology

- **Administration of Medications and IV Fluids for Direct Entry Midwives.** (14 hours, MEAC accredited) The content of this workshop is designed to meet state requirements for medication and IV administration. There is hands-on practice for IV starts, fluid administration and rate calculation, and administration of medications including eye ointment, vitamin K, Rhogam, Pitocin, Cytotec, and Methergine.

Antepartum complications, Intrapartum complications, Postpartum complications, and Neonatal care

- **Suturing in Midwifery Practice** (8 hours, MEAC accredited). This workshop is designed for students and primary practitioners and who want to learn a simple and straightforward approach to suturing. Some of the topics include; preserving the perineum, the importance of history-taking, how prenatal nutrition relates to skin integrity, episiotomy, evaluating the laceration, informed consent, choosing supplies & equipment, choices for anesthesia and more. Demonstration and practice: hand & instrument ties, interrupted sutures, running sutures, subcutaneous sutures, perineal doubles, labial & periurethral tears, bleeders and after care.
- **The Ins & Outs of Venipuncture IV Certification & Blood Draws** (6 hours, MEAC accredited). This workshop is designed for midwives and students to learn venipuncture in midwifery practice. The workshop is for attendees who wish to certify in IV catheterization and venipuncture and has a renewal component for those previously certified. Discussion: appropriate use of IV therapy, risks & benefits, solution & equipment choices, informed consent, charting, aseptic technique and tips for success. Attendees must have a successful, blood draw and I.V. start to obtain certification.
- **Intrapartum Fetal Surveillance for Midwives** (3.5 hours, MEAC accredited) This workshop is designed for midwives and midwifery students to learn the importance of intrapartum fetal assessment. It focuses on assessing overall well being through fetal heart rate. Learn how to listen and respond to the baby's needs during labor and delivery. This workshop is taught by lecture, visual aids, sample client charts, and fetal monitor strips for open review and discussion.
- **Understanding and Resolving Shoulder Dystocia** (3 hours, MEAC accredited) This workshop is designed to help midwives and midwifery students learn and recognize all aspects of shoulder dystocia. The knowledge gained in this workshop will give the participant the opportunity to review and practice managing shoulder dystocia, preparing them to more confidently handle an emergency dystocia in midwifery practice. Our topics will include incidence & risk factors, prevention, signs & symptoms, methods of resolving shoulder dystocia real or environmental, understanding neonatal & maternal trauma, statistics and outcomes. This workshop is

taught by lecture, visual aids, demonstration and practice on models, for open review and discussion.

- **Newborn Examination for Midwives From Apgars to Footprints.** (5 hours, MEAC accredited) This workshop is designed for midwives and midwifery students as first line primary providers for the newborn to learn the importance of the initial examination. It focuses on recognizing normal newborn and common variations seen in real midwifery practice. It breaks the exam process into quick noninvasive understandable assessments, discusses new testing guidelines and recording the information. The topics include clinical history, informed consents, setup & supplies, examination techniques, standard examination practices, review of recommended testing, forms and charting. This workshop is taught by lecture, visual aids, demonstration and practice on models, for open review and discussion.
- **Midwifery Management of Neonatal Resuscitation.** (5 hours, MEAC accredited) This AAP certified NRP workshop covers neonatal transitional physiology (delayed cord clamping), the evidence-based studies behind the AAP/NRP guidelines such as the use of 100% O₂, pulse oximetry, babies born through meconium stained waters, thermal management, all pertaining to the newborn specific to out-of-hospital management.
- **Resolving Shoulder Dystocia for the Active, Mobile Woman Course.** (3 hours, MEAC accredited) Earn 3 CE contact hours by completing the online education, Resolving Shoulder Dystocia for the Active, Mobile Woman. Gail Tully teaches this hands-on class for midwives, their active apprentices, and L & D nurses. Physicians and residents are also very welcome.
- **Breech Basics for Midwives** (3 hours, ACNM accredited) Every provider needs to know how to handle a breech, which can arise unexpectedly. Gail Tully teaches this course that covers:
 - Signs of a safe breech versus a shoulder dystocia;
 - Surprise, surprise! When is it too late to transport;
 - Upright breech benefits and myths;
 - What does “Hands-off-the-breech” really mean to us?;
 - Resolving breech shoulder dystocia and head entrapment.
- **Pregnancy Complications** (1 hour, state-accredited ACCME recognized, Wild Iris Medical Education) The purpose of this course is to provide nurses and other healthcare professionals with a review of the incidence, risk factors, signs/symptoms, medical management, nursing care, maternal/fetal implications, and relevant patient teaching related to the most common complications that affect women during the antepartum, intrapartum, and postpartum periods of pregnancy. Upon completion of this course, you will be able to:
 - List the most common pregnancy complications.
 - Describe the incidence and risk factors for the most common pregnancy complications.
 - Identify signs and symptoms in women affected by pregnancy complications.

- Discuss the medical management and nursing care typically provided in response to pregnancy complications.
- Describe maternal and fetal implications arising from common pregnancy complications.
- Summarize relevant patient teaching offered to those experiencing pregnancy complications.
- **Part 1: Obstetric Emergencies** (22 hours (11 pharm hours), state-accredited/ACCME recognized, Western Schools) This exceptional high-level content course provides practical information to identify and treat the most commonly encountered obstetric emergent conditions. The course discusses such medical emergencies as pulmonary embolism, asthma exacerbation, thyroid storm, diabetic ketoacidosis, and epilepsy. Nurses will learn about the most frequent causes of abdominal pain during pregnancy and the appropriate diagnostic testing. The course also discusses ectopic pregnancy, cardiopulmonary resuscitation during pregnancy, perimortem cesarean delivery, hypertensive disorders of pregnancy such as preeclampsia/eclampsia, and bleeding and infection during pregnancy. In the discussion of chemical-biological warfare, participants will learn about assessment and management of the pregnant patient exposed to specific biological agents, toxins, chemicals, and radiation. The course describes care of patients with mosquito-borne illnesses such as West Nile Virus and the labor and delivery management of patients with human immunodeficiency virus (HIV) infection. Nurses will benefit from the discussion of placental separation, delivery techniques for shoulder dystocia, and types of lacerations. Transport of the pregnant patient is discussed, including treatment and transfer decisions for the patient in preterm labor or with premature rupture of membranes. In the discussion of postpartum emergencies, participants will learn how to assess and intervene in complications in the postpartum period. Finally, drug therapy in pregnancy is discussed, and nurses will learn how to identify appropriate medications for various clinical conditions in the pregnant patient.
- **Postpartum Care** (2 hours, state-accredited ACCME recognized, Wild Iris Medical Education) COURSE OBJECTIVE: The purpose of this course is to provide healthcare professionals with a review of postpartum physiology, psychology, assessment, normal adaptation, complications, and teaching of the postpartum patient.
LEARNING OBJECTIVES Upon completion of this course, you will be able to:
 - Describe the normal physiologic and psychological adaptations to the postpartum period.
 - Explain how to perform a postpartum nursing assessment.
 - Identify the teaching topics that are relevant to postpartum patients.
 - Identify indicators of intimate partner violence.
 - Summarize the treatment of maternal complications seen during the postpartum period.
 - List the symptoms that postpartum patients should report to their healthcare providers after discharge.

- **Assessment of risk in the term newborn** (6.4 hours, state-accredited/ACCME recognized, March of Dimes) Objectives: Provides perinatal and neonatal healthcare providers with essential, evidence-based information to assess a newborn's physiologic adaptation to extrauterine life and to assess for infectious or metabolic disorders and positively support development. Gestational age assessment, physical assessment and newborn behavior patterns are discussed. The module outlines nursing management during the early newborn period, including identification of risk factors, and assessment, monitoring and intervention during hospitalization and postdischarge follow-up.
- **Bleeding in early pregnancy: When is it an emergency?** (1 hour, state-accredited/ACCME recognized) Objectives: The purpose of this program is to inform ED nurses about the major causes, critical signs and appropriate triage of bleeding in early pregnancy. After studying the information presented here, you will be able to: Identify the four major causes of bleeding in early pregnancy; Describe key questions to ask during triage; List the critical signs that suggest ectopic pregnancy or inevitable miscarriage.
- **Hypertensive disorders of pregnancy** (1 hour, state accredited/ACCME recognized) Objectives: The goal of this program is to provide nurses with information about the differentiation of hypertensive disorders of pregnancy, the effect on the mother and fetus, and recommended management. After studying the information here, you will be able to: State the four classifications of hypertensive disorders of pregnancy; Identify adverse maternal and fetal outcomes associated with these disorders; Describe management of the disorders to optimize maternal and fetal outcomes.
- **Perinatal Infections** (3 hours, state-accredited/ACCME recognized) Objectives: The goal of this continuing education program is to update nurses' knowledge of the identification, care and management of patients with perinatal infections. After studying the information presented here, you will be able to:
 - Discuss changes in the prevalence of certain perinatal infections in relation to effective screening and vaccination programs
 - Differentiate between universal screening and high-risk prenatal screening protocols
 - Explain the modes of transmission of various pathogens from an infected mother to her fetus/newborn
 - Recognize maternal and fetal/newborn acute clinical manifestations and long-term sequelae that occur in association with perinatal infections
 - Describe the standards for diagnosis and management of selected perinatal infections recommended by national guidelines
 - Discuss the role of the nurse as a health educator in caring for the woman who presents with, or is at increased risk for developing, a perinatal infection
- **Postpartum care** (5.4 hours, state-accredited/ACCME recognized, March of Dimes) Objectives: Provides the perinatal nurse with critical knowledge to

safely and effectively care for mothers during the postpartum period. Offers strategies for prenatal education, discharge planning and postpartum care. Comprehensive physical, learning needs and psychological assessments are outlined.

Lab interpretation in pregnancy

- **Physiologic Changes and Laboratory Values** (1 hour, state-accredited ACCME recognized, Wild Iris Medical Education) **COURSE OBJECTIVE:** The purpose of this course is to review normal and abnormal physiologic changes that may occur during pregnancy and the laboratory values that indicate these changes. **LEARNING OBJECTIVES:** Upon completion of this course, you will be able to: Describe normal and abnormal physiologic changes of pregnancy. Identify laboratory results for normal and abnormal physiologic changes during pregnancy.