



DEPARTMENT OF THE NAVY
BUREAU OF MEDICINE AND SURGERY
2300 E STREET NW
WASHINGTON DC 20372-5300

IN REPLY REFER TO

BUMEDINST 6550.11
BUMED-M09BNC
5 Jan 2004

BUMED INSTRUCTION 6550.11

From: Chief, Bureau of Medicine and Surgery
To: Ships and Stations Having Medical Department Personnel

Subj: UTILIZATION GUIDELINES FOR NURSE MIDWIVES

Ref: (a) The American College of Nurse-Midwives Standards for the Practice of Nurse-Midwifery, 1993
(b) BUMEDINST 6320.66D
(c) BUMEDINST 6010.17B
(d) SECNAVINST 6401.2A
(e) BUMEDINST 1001.2B
(f) Manual of Navy Officer Manpower and Personnel Classification, Volume I, NAVPERS 15839I of 7 Oct 2003
(g) Position Classification Standard for Nurse Series, GS-610
(h) BUMEDINST 12430.4
(i) Manual of the Medical Department, Chapter 21
(j) BUMEDINST 6010.13
(k) ASD(HA) policy memo 96-047 of 30 May 1996
(l) ASD(HA) policy memo 97-026 of 22 Jan 1997

1. Purpose. To clarify, expand, and reemphasize guidelines for the utilization of military and civilian certified nurse midwives (CNMs) within the Navy health care delivery system.

References (a) through (l) provide further guidance.

2. Cancellation. NAVMEDCOMINST 6550.2.

3. Background. Nurse-midwifery practice is the independent management of women's health care, focusing particularly on pregnancy, childbirth, the postpartum period, care of the newborn, and family planning, gynecological and other primary care needs of women per references (a) and (b). CNMs working in Navy Medicine include military personnel (active duty and Reserve components) and civilian health care practitioners, who may be assigned to, employed by, contracted to, or under partnership with Department of the Navy activities as needed. Per reference (c), the nurse midwife is a member of the Naval Medical Department medical staff.

4. Definitions

a. Certified Nurse Midwife (CNM). A registered professional nurse who has successfully completed a graduate educational program accredited by the American College of Nurse-Midwives (ACNM) Division of Accreditation and has passed a national certification examination to receive the professional designation of CNM. As primary care provider, the CNM assumes responsibility for provision of and referral for appropriate services within a defined scope of practice.

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b. Graduate Nurse Midwife (GNM). A GNM has successfully completed an ACNM-approved graduate education program in midwifery and all other prerequisites to sit for the certification examination.

c. Primary Care. A method of definitive health care delivery, which engages the patient during the initial encounter and assumes ongoing responsibility for the health care needs of the patient across the health continuum. Primary care includes health promotion, health maintenance, patient education and counseling, and management of acute and chronic illnesses. This personal care involves a unique interaction and communication between patient and health care provider. Comprehensive in scope, primary care includes the overall coordination of the patient's biologic, behavioral, and sociologic health care needs. Appropriate use of consultants and community resources is an essential part of effective primary care.

5. Licensure and Certification. The nurse-midwife shall possess a valid State license to practice professional nursing per reference (d). Initial certification and subsequent recertification as prescribed by the ACNM Division of Accreditation is required.

a. The GNM is required to possess specialty certification within 12 months of completion of an approved graduate level advanced practice nursing educational program in the specialty of nurse-midwifery. The GNM will practice under a command-approved plan of supervision and be monitored by a licensed practitioner (CNM or physician) having the same or similar professional privileges per references (b) and (c) until certification is obtained and the privileging process is completed.

b. Military CNMs (active component) may request a change of subspecialty codes by submitting evidence of graduate education and national professional certification to Bureau of Medicine and Surgery (BUMED), Nurse Corps Career Plans Officer (M09BNCB), 2300 E Street, NW, Washington, DC 203732-5300. Reserve component CNMs shall submit the same evidence for a change of Naval Officer Billet Classification (NOBC) and subspecialty code assignments per reference (e) to Assistant to the Director, Reserve Matters (M09BNCBR) at the above address.

6. Scope of Practice. CNMs are authorized to function within the full scope of their granted privileges as delineated in references (b) and (c).

a. Upon obtaining specialty certification, the CNM shall request a professional staff appointment to include the broadest scope of core and supplemental privileges commensurate with their level of professional qualification, current competence, and the ability of the facility to support the privileges requested.

b. Fully privileged CNMs have independent admission and discharge privileges, per reference (b) and (c).

7. Utilization. Certain utilization policies have been established regarding nurse midwives.

a. Military (active and Reserve) CNMs are assigned to the commanding officer in a subspecialty-coded billet per reference (f). Civilian CNMs are assigned to the medical activity and their position descriptions and performance standards are developed following guidance contained in references (g) and (h). Collateral duties may be assigned by the commanding officer or designee.

b. CNMs work in a collaborative role with other members of the health care team.

c. If CNM watches are needed, watchstanding will be performed within the clinical specialty and are equitable among other like providers. Physician consultation will be available in a timely period during the watchstanding period.

d. Direct lines of communication must remain open between the CNM and the other senior nurse executive to remain abreast of current Nurse Corps issues and for career counseling. Overall responsibility for military fitness reports remains with the cognizant department head in collaboration with the senior nurse executive. Responsibility for civilian performance appraisals is guided by references (g) and (h). The senior CNM will mentor junior CNMs. The specialty leader will be available for CNM community guidance.

8. Medical Records. Legibility and accuracy of the entries on medical records are the responsibility of the CNM. Orders written on patient medical records by CNMs do not require a physician co-signature unless the CNM is under a plan of supervision per reference (b).

9. Prescribing Medication. Medications must be prescribed as directed by reference (i).

10. Monitoring and Evaluation. The ongoing evaluation of the quality of care, both process and outcome, rendered by CNMs must comply with the facility's quality assurance instruction and the guidelines in references (c) and (j). Health record reviews will evaluate a CNM's performance regarding appropriate patient management and competence while focusing on improving the quality and usefulness of the medical record in documenting patient care. Whenever possible, peer review will be accomplished by other CNMs; if not available for timely peer review, a physician in a like specialty must review the health record. Input from these activities must be incorporated into the privileging process as directed in reference (b).

11. Board Certified Pay (BCP). Active duty Navy CNMs are eligible for BCP as outlined in references (k) and (l). Officers meeting the requirements must submit relevant documentation, board certification, or a copy of notification letter of certification, and diploma and transcripts showing completion of masters degree in the same advanced practice specialty as their certification via the chain of command to BUMED-M132.

a. BCP will be terminated upon expiration of board certification, loss of certification, or separation from active duty per references (k) and (l).

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b. Recertification documents should be forwarded immediately to BUMED-M132 to avoid termination of BCP.

12. Continuing Education. The CNM must comply with continuing education requirements necessary to maintain State registered professional nurse licensure and specialty certification.



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Available at: <http://nmo.med.navy.mil/default.cfm?selTab=Directives>