

Explanatory remarks for the table „Overview of how to cope with risks from identified catalogues“

The layout of the table is in DIN A3 and comprises 76 pages.

It shows an overview of how responsibility is split up between midwives and obstetricians in Germany and ten further countries (Austria, the Netherlands, England, Ireland, Norway, Iceland, Canada, USA, Australia, New Zealand) for 243 obstetric conditions. These refer to irregularities before and during pregnancy, intrapartum and postpartum. Relevant German regulation has been carefully observed, such as the midwives' act, the expert standard „promotion of physiological birth“, the midwives' professional code, the maternity guidelines edited by the Federal Joint Committee and 21 guidelines from the Association of the Scientific Medical Societies in Germany.

There are two columns for Germany: the first showing regulation for home births, agreed upon in January 2020 as well as the second with responsibilities for births in hospital, where the midwife manages the delivery room „on her own“. The criteria in this column have been developed 2007 within a pilot project at the University of Applied Sciences of Osnabrück and were documented in the „Handbook Midwife's Delivery Room“.

Grafical organisation of the content of the findings

All the 243 obstetrical findings are presented in four chapters of chronological order, which refer to the different phases of pregnancy and birth:

- I. general history (pink frame): findings before the onset of pregnancy
- II. pregnancy specific history (blue frame): findings during pregnancy
- III. birth (grey frame): intrapartum findings
- IV. care after birth (postpartum) (lilac frame): findings after birth

Grafical organisation of the responsibilities

The responsibilities of midwives and doctors are classified into three categories according to traffic light colours:

- **green** for findings the midwife will cope with alone
- **yellow** for findings to be discussed with a medical doctor
- **orange** for findings, that belong into obstetric care.

Red marks emergency cases in Austria and New Zealand.

Mild red marks an additional Dutch option, which allows the self-employed midwife to join the woman to hospital in order to finish a birth there, although it had been initiated in a birth center or at home

Special feature in England:

The NICE guideline only contains two categories (green or orange), with an „individual assessment“ for assignment, which often also involves consultation.