

Midwifery in Oklahoma: Building Bridges Across Birth Settings



Ashley Dougherty
LM, CPM
Midtown Birth Center



Chad Smith
MD, FACOG, FACHE
Medical Director



Amy Calhoun-Vasko
APRN-CNM
Newman Memorial
Hospital



Regina Kizer
DNP, APRN-CNM
Breathe Birth and
Wellness



Shamika Antwine Boone
Certified Community Doula
Oklahoma Doula Collective



Speaker Bios

What would your team do?

A healthy first-time mother planned an OOH birth with a licensed midwife. Labor has progressed normally over many hours, and both mother and baby remain stable. However, after several hours, the client is becoming physically exhausted and requests additional pain management options that are not available in the OOH setting.

After discussion with the client and her support team, the midwife recommends transfer to the hospital for further evaluation, pain management, and continued labor support. The family agrees with the plan.

The midwife contacts the receiving hospital to provide a report, and the client arrives approximately 45 minutes later.

Questions to Discuss (10 minutes)

1. What information would be most helpful for the receiving team to receive before the client arrives?
2. What actions by the hospital team and community midwife can support a coordinated, respectful, and patient-centered transfer experience?
3. What opportunities exist for the hospital team and community midwife to work together to support a seamless transfer of care?

Report-Out Instructions (5 minutes)

Please select a spokesperson and share:

1. One key takeaway from your discussion
2. One recommendation to improve collaboration during transfers

Time Limit: 90 seconds

Oklahoma Birth Transfer Collaborative

A quality improvement initiative dedicated to strengthening communication, coordination, and continuity of care across birth settings when a planned out-of-hospital birth requires a hospital transfer.

In Closing . . .



OKLAHOMA PERINATAL **QUALITY**
IMPROVEMENT COLLABORATIVE

