

POSITION STATEMENT

The Certified Nurse-Midwife/Certified Midwife as First Assistant during Surgery

The American College of Nurse-Midwives (ACNM) affirms the following:

- Acting as the first assistant during obstetric or gynecologic surgery is within the scope of expanded practice of certified nurse-midwives and certified midwives.
- The ACNM *Standards for the Practice of Midwifery*¹ and the position statement *Expansion of Midwifery Practice and Skills Beyond Basic Core Competencies*² provide guidance and outline the steps that midwives should follow to prepare for expanded midwifery practice.
- A specific credential external to the midwifery profession is not necessary for the midwife to function as first assistant during obstetric or gynecologic surgery.
- Several different education and training mechanisms are appropriate to obtain the skill set necessary to practice in the first assistant role during obstetric or gynecologic surgical procedures.

Background

Expanding midwifery practice to include the ability to serve as first assistant during obstetric or gynecologic surgery can promote patient-centered care, enhance continuity of care, improve access to and timeliness of emergency care, and increase the value of the midwife as a member of the health care team. The role of the midwife as first assistant is one of active participation and requires the midwife to function independently in a coordinated and collaborative manner with the surgeon to facilitate a safe surgical procedure.³ Midwives frequently act as first assistants during cesarean birth, and this expanded skill may be a required skill at a given place of employment.

Advanced education provides midwives with knowledge and competencies required for first assistants, including patient assessment, anatomy and physiology, principles of wound evaluation and repair, and basic surgical skills such as aseptic technique and suturing. *The Midwife as Surgical First Assistant*³ provides a basis for perioperative education, skill development, and guidance regarding the expansion of midwifery practice to include surgical first assist.

Standard II of the *Standards for the Practice of Midwifery*¹ and the ACNM Position Statement *Expansion of Midwifery Practice and Skills Beyond Basic Core Competencies*² outline the steps midwives must follow to expand their scope of practice and gain new technical skills. As with

any expanded midwifery practice skill, performing in the role of first assistant is based on the individual midwife's education, practice situation, and professional interests.

Midwives routinely function in the perioperative setting to provide support and continuity of care. The ability to act as a surgical first assistant is governed by hospital credentialing processes, medical staff regulations, and in some instances state laws or regulations. Following appropriate education and training and demonstrated competency, midwives may seek privileges to function in the perioperative setting as the surgical assistant with cesarean, tubal ligation, and other obstetric and gynecologic surgery.

Educational Preparation

To assure that midwives who serve as first assistants do so safely within the scope of midwifery practice, those who have not been educated and trained as a first assistant before or during their midwifery education programs should:

- Follow *Expansion of Midwifery Practice and Skills Beyond Basic Core Competencies*² to gain the knowledge and learn the procedures necessary to demonstrate competency as first assistants in obstetric or gynecologic surgery.
- Document the education, training, and evaluation process.
- Document competency and continued proficiency.
- Use of an objective assessment tool is recommended.

The steps outlined in *Expansion of Midwifery Practice and Skills Beyond Basic Core Competencies*² indicate that midwives are responsible for obtaining and documenting their educational processes, which may include but are not limited to independent or formal study, mentored simulation, clinical practice, and comprehensive evaluation. The duration of mentored clinical practice necessary to demonstrate competency is dependent on any prior perioperative experience, volume and type of participation, facility-specific expectations for the scope of the first assistant role, and individual mentoring styles.

Scope of Practice

The activities midwives perform as first assistants are an expansion of autonomous midwifery practice that is executed within the context of active collaborative relationships with the surgeon and other perioperative personnel in a manner supportive of the patient and family. The scope of perioperative practice for the midwife first assistant includes pre-, intra-, and post-operative care. Components of care may vary based on the midwife's education, clinical experience and expertise, clinical practice site, state licensing statute or rule, and surgeon preference. Effective interprofessional communication and actions to maintain the safety and well-being of the patient are integral components of all aspects of perioperative care.

The preoperative skill set demonstrated by the midwife first assistant may include but is not limited to:

- Determining the need for cesarean or other obstetric or gynecologic surgery and obtaining consultations with surgical and anesthesia colleagues
- Performing the preoperative history and physical examination
- Initiating preoperative orders
- Participating in the informed consent process and obtaining consent
- Providing support and information

The intraoperative skill set demonstrated by the midwife first assistant may include but is not limited to:

- Positioning, preparing, and draping the patient
- Applying surgical aseptic technique
- Using of surgical instruments and devices
- Providing exposure
- Handling and dissection of tissues
- Suturing tissues and closing wounds
- Providing hemostasis
- Initiating emergency actions as indicated

The postoperative skill set demonstrated by the midwife first assistant may include but is not limited to:

- Initiating immediate postoperative orders
- Performing postoperative rounds and initiating orders
- Identifying postoperative complications, triaging, and obtaining consultation when indicated
- Follow-up after discharge

Credentialing

The medical staff office of each facility is encouraged to formulate a uniform process and expectations to include surgical first assistant privileges as part of midwifery practice. When a midwife seeks to include first assistant privileges, the midwife is expected to obtain and provide evidence of relevant education, training, and competency consistent with this position statement.

REFERENCES

1. American College of Nurse-Midwives. Standards for the practice of midwifery. Updated 2022. Accessed October 17, 2023.
https://www.midwife.org/acnm/files/acnmldata/uploadfilename/00000000051/2022_ps_standards-for-the-practice-of%20midwifery.pdf
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2. American College of Nurse-Midwives. Expansion of midwifery practice and skills beyond basic core competencies. Updated April 2022. Accessed August 17, 2023. [https://www.midwife.org/acnm/files/acnmlibrarydata/uploadfilename/000000000066/2022_ps_expansion-of-midwifery-practice-beyond-core-competencies%20\(2\).pdf](https://www.midwife.org/acnm/files/acnmlibrarydata/uploadfilename/000000000066/2022_ps_expansion-of-midwifery-practice-beyond-core-competencies%20(2).pdf).
 3. Tharpe NL. *The Midwife as Surgical First Assistant*. 3rd ed. Washington, DC: American College of Nurse Midwives; 2020.
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Note. The terms *midwifery* and *midwife* as used throughout this document refer to the education and practice of certified nurse-midwives (CNMs) and certified midwives (CMs) who have been certified by the American Midwifery Certification Board (AMCB).

Source: Division of Standards & Practice

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