
Appendix A - CMA Restricted Activities Policy

CMA Reference List of Identified Restricted Activities (September, 2024)

Please refer to Section 34 of the *Health Professions Restricted Activity Regulation (2023)* for the foundational language on which CMA developed this reference list and for definitions of terms **bolded** below.

Preamble

All registrants on the CMA General, Provisional and Courtesy registers are expected to be competent in as many of the **restricted activities** in *HPRAR Section 34* as possible. Ultimately, registrants choose the **restricted activities** they incorporate into their practice. This determination is based on self-assessment of **continuing competence** and capacity, geographical location (e.g. urban, rural, remote), community needs and other pertinent factors.

Restricted activities- *Section 34* will not be listed on a registrant's Practice Permit or the CMA Public Register.

Registrants are ethically and legally obligated to disclose any limitations with their **scope of practice** to their **clients** and other health care providers, including consultants. Registrants are expected to offer to arrange consultation/collaboration to another **Primary Care Provider** when they have limitations to **restricted activities**.

CMA recognizes that there are identified **restricted activities** such as conducting and managing planned vaginal breech and twin birth. Historically, vaginal breech and twin birth have been regarded as part of midwifery **scope of practice** only during unplanned or emergency situations, which remains a required **competence** for all registrants under emergency skills management certification. CMA acknowledges that both vaginal breech and twin birth are normal variations of birth that fall under midwifery **scope of practice**. Registrants who identify that they have the **competence** to offer care for planned midwifery-led vaginal breech and twin birth may do so following comprehensive informed choice discussions with their **client**, which would include disclosure of education and skill level.

The above **restricted activities** may not be universally practiced within every registrant's midwifery work setting. CMA does not expect all registrants to conduct and manage planned breech and twin birth and it is reasonable to consult and transfer care to an obstetrician or another midwife education and skill level.

Registrants who work to their full scope as detailed in *Competencies for Alberta Midwives (2021)*, including **restricted activities**, do so under the authorization of the CMA. Please note

that **health care facility** administrators have authority to impose limits on **restricted activities**, based on facility resources. Individual health care providers are however not permitted to limit midwifery **restricted activities**.

Note: that this list is not exhaustive. CMA may consider and/or revise restricted activities.
All restricted activities are only performed when **incidental to the practice of midwifery**.

Birth Person

1. Perform intravenous catheter initiation
2. Perform intramuscular injections
3. Perform subcutaneous and intradermal injections
4. Perform local anesthetic infiltration
5. Order non-ionizing radiation (ultrasound) for obstetrical and reproductive healthcare purposes
6. Conduct and manage vaginal cephalic presentation birth
7. Conduct and manage vaginal breech birth
8. Conduct and manage vaginal twin birth
9. Conduct and manage a water birth
10. Order, insert and manage **cervical ripening** including mechanical and medication modalities
11. Manage oxytocin induction and augmentation of labour, including Contraction Stress Test (CST), after consultation and order for oxytocin, provided by another authorized health care provider
12. Order consultation for epidural anesthesia and provide epidural management as per provider orders post epidural placement
13. Perform episiotomy
14. Assess genitalia for tears and perform repair of vulvar, vaginal and perineal tears including 1st and 2nd degree lacerations and episiotomy
15. Remove sutures and/or staples
16. Insert or remove instruments, devices, suppositories, fingers or hands beyond the labia majora, but not for the purpose of inserting an intrauterine contraceptive device.
Including but not limited to:
 - a. Cervical ripening devices (e.g. foley catheter)
 - b. Internal fetal scalp electrode
 - c. Amnihook for artificial rupture of membranes
 - d. Intrauterine contraceptive device removal
 - e. Vaginal speculum

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- f. Vaginal and endocervical swabs
 - g. Instruments for inspection of vaginal and cervical tears
 - h. Urinary catheter (in and out/indwelling)
17. Perform rectal digital assessments, e.g. for tears; give enemas, insert rectal medications
 18. Prescribe and/or administer RhD immune globulin
 19. Prescribe and/or administer Hepatitis B vaccine, measles mumps and rubella vaccine
 20. Prescribe and/or administer anesthetic gases (including nitrous oxide) for anesthesia or sedation
 21. Prescribe, dispense and administer Schedule 1 drugs **incidental to the practice of midwifery** (excludes prescription of: controlled substances, oral contraceptives, contraceptive devices, vaccines not identified or uterotonic drugs for induction and augmentation of labour). Dispense and administer Schedule 2 drugs
 22. Prescribe and administer uterotonic drugs for 3rd stage and to manage postpartum hemorrhage
 23. Perform manual removal of placenta
 24. Perform digital manual rotation of the fetal head

Newborn/Infant

All restricted activities are only performed when **incidental to the practice of midwifery**.

1. Perform Neonatal Resuscitation Activities (Advanced Provider Level)
 - a. Insert suction catheter
 - b. Insert nasogastric tube
 - c. Insert endotracheal tubes and Laryngeal Mask Airways (LMA's)
 - d. Suction Endotracheal tubes
 - e. Insert umbilical venous catheter
2. Perform rectal digital exams ie. assess for imperforate anus; insert rectal suppositories
3. Prescribe, dispense and administer Schedule 1 drugs (except for controlled substances) **incidental to the practice of midwifery**
4. Prescribe and administer hepatitis B vaccine and immune globulin
5. Conduct a heel poke for newborn screening and testing
6. Perform intramuscular injections
7. Assess and perform frenotomy of oral tethers (including lingual, maxillary and buccal tethers)
8. Order non-ionizing radiation (eg. ultrasound) for obstetrical follow up purposes (i.e.. newborn conditions identified during antenatal ultrasound or on newborn examination).
9. Assess, order, and manage phototherapy for the newborn