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## The Midwife.

### THE CENTRAL MIDWIVES BOARD.

### ADMINISTRATION OF NITROUS OXIDE AND AIR ANALGESIA BY MIDWIVES.

DEAR MADAM,-With further reference to my letter of October 10th, 1942, I am directed to inform you that the Board has again approached the Royal College of Obstetricians and Gynaecologists with reference to the need for persisting in the qualifications made with regard to the second person to be present when a midwife administers nitrous oxide and air analgesia.

The College has submitted a report on this and matters concerning the training of midwives in the use of this form of analgesia.

The Board has amended section 3 of its regulations for the administration of nitrous oxide and air analgesia by mid-wives as from September 1st, 1945. This section will then be as follows :-

"3. One other person, being any person acceptable to the patient, who in the opinion of the midwife is suitable for the purpose, is present at the time of the administration in addition to the midwife in charge of the case."

The Board is anxious that midwives shall have all possible facilities, concomitant with the safety of the patient, for the relief of pain during childbirth, and it is therefore introducing this change in the regulations at a date prior to the announcement of amendments to the regulations for the training of midwives in the administration of analgesia, of which an announcement will follow in the near future.

Yours faithfully,

#### L. FARRER BROWN.

# ADVISORY MEMORANDUM REGARDING THE USE OF DRUGS AND OF GAS AND AIR ANALGESIA BY MIDWIVES.

#### Revised in April, 1944.

The midwife should remember that Rules E. 10 (a), (b) and 11 of the Rules of the Central Midwives Board are as follows :

10. (a) A midwife must not, except under a grave emergency, undertake operative procedure or any treatment which is outside her province.

(b) A midwife must not on her own responsibility use any drug unless, in the course of her obstetric training, whether before or after enrolment, she has been thoroughly instructed in its use and is familiar with its dosage and methods of administration or application.

11. Except in the case of a simple aperient a midwife must note in her Register of Cases each occasion on which she admin-isters or applies in any way any drug, stating the name and dose of the drug and the time and cause of its administration or application (Rule 34). Note: The question whether in any particular case procedure or treatment was justified will be judged on the facts and circum-

stances of the case.

The Board, for example, would regard the giving of pituitary extract before the birth of the placenta, except under a grave emergency, as treatment outside a midwife's province.

Drugs which may be Carried and used by Midwives. (Note : Provided the midwife has been adequately instructed in their use, there is no bar to her carrying stronger drugs than those

specified in the list.) The drugs in the list given below may ordinarily be carried by a midwife in addition to aperients :---

- (i) General Antiseptics.
  (ii) Drops for instillation into the child's eyes.
- (iii) General stimulants.
- (iv) Preparations of Ergot.
- (v) Sedatives FOR THE MOTHER, such as Bromide of Potassium, Chloral Hydrate, Tincture of Opium.

A drug should not be used by a midwife on her own responsi-

bility unless in the course of her obstetric training, whether before or after enrolment, she has been thoroughly instructed in its use and is familiar with its dosage and methods of admin-istration or application. This especially applies to opium and includes knowledge of the legal requirements of the Dangerous Drug Regulations with which she must comply.

Note : Under the Dangerous Drug Regulations a midwife cannot obtain opium unless she has given notice of intention to practise to her Local Supervising Authority in accordance with the provisions of the Midwives Act, 1902, section 10, and she must enter in a book to be kept for the sole purpose particulars of all supplies obtained, including the date, quantity, and name and address of the person from whom obtained.

#### Administration of Gas and Air by Midwives.

In the application of Rule E. 10 (a) and (b) the Board regards In the application of Rule E. 10 (a) and (b) the Board regards the administration by a midwife, acting as such, of gas and air by Minnitt's or similar apparatus for the purpose of producing analgesia during labour as treatment within her province, provided that:

1. She has, either before or after enrolment, received at an institution approved by the Board for the purpose, special instruction in the essentials of obstetric analgesia and has satisfied the institution that she is thoroughly proficient in the use of the

2. The patient has within one month before her confinement been examined by a registered medical practitioner who has handed to the midwife a certificate in writing that the patient is in a fit condition for gas and air administration and

3. One other person, being one or other of the following, is present at the time of administration in addition to the midwife in charge of the case

- (a) a state certified midwife.
- (b) a state registered nurse.
- (c) a senior medical student.(d) a pupil-midwife.

(e) a retired midwife who has surrendered her certificate in accordance with the Midwives Act, 1936, section 5 (1). (f) a woman who is over 21 years of age and who is, and

has been for at least a year-

(i) a V.A.D. or ordinary member of the British Red Cross Society or the Order of St. John, or
 (ii) a duly enrolled member of the Civil Nursing Reserve.

Administration by a midwife of any anaesthetic, otherwise than under the personal direction and supervision of a registered medical practitioner, is regarded as treatment outside her province.



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