

From: [Roeuny, Sondra](#)
To: [Avery, Catherine, DOH](#); [Showers, Aryan, DOH](#); [Jimenez, Billy, DOH](#)
Subject: [EXT] Public Comments for DOH Rule Change 16.11.2 (certified nurse midwives)
Date: Monday, October 26, 2020 9:20:04 AM

Dear DOH rule change administrators,

Per the public notice, which did not direct the reader on what email to submit comments, but did note that comments will be received via email through the conclusion of the hearing, which occurs today at 9:30am, Planned Parenthood of the Rocky Mountains, New Mexico submits the following comments:

ISSUES WITH DOH RULE CHANGE 16.11.2 (certified nurse midwives):

1. PPRM appreciates the intent of the DOH CNM rule change section that removes the words "male patient" and inserts instead "client/patient". It is important to be clear that it is within a CNM's scope of practice to treat patients who do not identify as a woman. This change reflects the importance of respecting a patient's gender identity.
2. PPRM urges DOH to remain consistent in this gender non-binary intent by changing section E to remove the reference to "him/her" as it relates to the provider.
3. PPRM urges DOH to make similar changes by removing reference to gender within the DOH Licensed Midwife rule, section <http://164.64.110.134/parts/title16/16.011.0003.html> in order to make it clear that licensed midwives can also treat patients who do not identify as a woman.
4. PPRM urges the removal of the words "fetal demises" in section E, since it is not accurate terminology for addressing stillbirths or problems in delivery with the pregnant person or the pregnancy. There is no definition for fetal demises in this rule or any rules. In fact, fetal demise is a term that is used in abortion care, which is not relevant to this rule. Additionally, section E without the words "fetal demises" covers what the department appears to want to address, which is complications experienced in the home birth with the pregnancy person or with the baby.

E. Immediate reporting: A CNM must report within 48 hours to the division any neonatal or maternal mortality in patients for whom she/he has cared in the perinatal period in a setting other than a licensed health facility; **this includes fetal demises.** These will be reviewed by the division on a case by case basis for compliance with these CNM regulations.

Thank you for your consideration for these changes.

Regards,
Sondra

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