



Midwife Patricia Brown (left) along with midwife Louise Dowling-Krall (right) helped with the delivery of Fiona McKeon (center). (STAFF PHOTO: BRADLEY J. PENNER)

Special Delivery

*Midwives help
get babies
off to a good
start – and
much more*

By MICHAEL RILEY
STAFF WRITER

There is a painting in the lobby of the Center for Women's Health in Avon that speaks to the ancient nature of what goes on within the facility.

The artwork is a stylized portrait of Shiphrah and Puah — the Hebrew midwives who, in the first chapter of the Book of Exodus in the Bible, defied Pharaoh's order to murder the baby boys they delivered.

At the very least, this shows that midwifery has been around a while. And it doesn't look like it's going anywhere soon.

According to the American College of Nurse-Midwives, based in Silver Spring, Md., there are approximately 5,700 in clinical practice.

And like some latter-day Puah and Shiphrah, midwives Patricia G. Brown and Louise M. Dowling-Krall continue the tradition.

Brown received her certificate in midwifery in 1998 from the University of Medicine & Dentistry, Newark. She has been in private practice since 1998, and is a member of the American College of Nurse Midwives.

Dowling-Krall received a master's degree in nursing and midwifery from the University of Pennsylvania in 1995. She has been in private practice since 1996. She is a member of the American College of Nurse Midwives.

These women know something about birthing babies.

The 21st-century midwife has more tools at her disposal than did her Biblical counterparts — and more even than the midwives



As Dowling-Krall holds baby Fiona, parents Christopher and Elaine and big sister Charlotte, 2, look on. (STAFF PHOTO: BRADLEY J. PENNER)

WHO TO CALL

■ For more information on the Center for Women's Health in Avon, call (732) 776-9790.

of the American frontier days, as depicted in those old black-and-white Westerns, whose cries of "Boil some water and get me clean sheets!" signaled the arrival of a baby.

Midwives certainly do more than deliver babies. The Avon center offers a range of services.

"We can care for women from adolescence through post-menopause," said Dowling-Krall, "providing routine GYN care, low-risk obstetrics/labor and delivery,

menopause management, prescription privileges, diagnostic studies, nutritional counseling, family planning, adolescent health issues and ultrasound."

They cannot perform C-sections.

But when it comes to labor and delivery, Brown said, "eighty-five percent of women are healthy and with low-risk pregnancies."

Of course, even low-risk pregnancies can bring a surprise or two.

That was certainly the case on Oct. 7, when a very pregnant Elaine McKeon and her husband, Christopher, of Manasquan dropped into the midwives' Main Street office.

Elaine was pregnant with her second child and came to the office because she was having contractions and wanted to know if it was time to go to the hospital.

Turned out it was past time.



Midwife Louise Dowling-Krall holds Fiona McKeon, as the baby's parents, Elaine and Christopher of Manasquan, look on. (STAFF PHOTO: BRADLEY J. PENNER)

Midwives

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Fiona McKeon was born right there in exam room 2.

"This was our first delivery in the office in the eight years we've been here," Dowling-Krall said.

But it's not like they were unprepared. The office comes complete with something called a precipitous labor pack containing all the paraphernalia needed for a safe birth, including such things as gloves, a bulb syringe and clamps.

The Avon first aid squad arrived to bring the healthy mom and daughter to Jersey Shore University Medical Center in Neptune.

Usually, the midwives meet the in-labor mom at the hospital. That was the way it happened when Elaine gave birth to her first child, Charlotte, more than two years before.

She decided to go the midwife route on the recommendation of a friend.

"A friend told me about Louise and Patty when I was pregnant with Charlotte," she said.

Her experience that time around made her a believer.

"There is a personal connection," Elaine said.

"They spend time with you. The whole experience is a lot warmer than a typical visit to a doctor's office," she said.

Both Brown and Dowling-Krall see that difference in tone and outlook as one of the advantages of their practice.

"We see birth as more natural, a celebration of life, rather than a condition to be treated," said Dowling-Krall.

Certified nurse midwives require extensive training, and, while both of the women at the Women's Health Center began their careers as labor and delivery nurses, they both went back to school for years to get their certification.

They are affiliated with Meridian Ob/Gyn Associates at Jersey Shore University Medical Center in Neptune.

Midwifery practices routinely work with what is called a collaborating physician. In the case of the Center for Women's Health in Avon, it's Dr. Steven Morgan, an OB-GYN with offices in Ocean Township and Toms River.

"Women should have options," Morgan said. "Some patients are more comfortable with midwives. And midwives cut down on the number of unnecessary C-sections. Usually midwives are hired by larger OB-GYN

MIDWIFERY

A CLOSER LOOK

■ Nurse-midwifery practice is legal in all 50 states and the District of Columbia.

■ Thirty-three states mandate private insurance reimbursement for nurse-midwifery services and Medicaid reimbursement is mandatory in all states.

■ More than 60 percent of certified nurse-midwives (CNMs) and certified midwives (CMs) list physician practices or hospitals/medical centers as their principal employers.

■ The majority of midwife-attended births occur in hospitals. In 2005, 96.7 percent of midwives' deliveries occurred in hospitals, 2 percent in freestanding birth centers and 1.3 percent were homebirths.

■ Nurse-midwives have prescription writing authority in all 50 states, the District of Columbia, American Samoa and Guam.

Source: American College of Nurse-Midwives fact sheet

practices. Patty and Louise are unique in that they have their own practice."

Collaborating physicians, Morgan said, are immediately available to aid midwives in the event of an emergency.

When it comes to his family's experience with at least two highly trained midwives, Christopher McKeon is pleased.

"Why doesn't everybody do this?" is the way he put it.