

MINUTES

MONTANA SENATE
51st LEGISLATURE - REGULAR SESSION

COMMITTEE ON PUBLIC HEALTH, WELFARE AND SAFETY

Call to Order: By Senator Tom Hager, on March 13, 1989, at
1:00 p.m., Room 325, State Capitol

ROLL CALL

Members Present: Senators Tom Hager, Chairman; J. D. Lynch,
Matt Himsl, Bill Norman, Harry H. McLane, Bob Pipinich

Members Excused: Senator Tom Rasmussen

Members Absent: None

Staff Present: Tom Gomez, Legislative Council
Dorothy Quinn, Committee Secretary

Announcements/Discussion: None

HEARING ON HOUSE BILL 458

Presentation and Opening Statement by Sponsor: Dr. Ray Peck, Representative from House District #15, stated he mentioned his academic degree only to indicate the great respect that he has for education and he knows many of those gathered share that respect. He feels the significance of the bill is that it is an act establishing parents' rights regarding the birth of a baby. In the statement of intent, line 20, the Legislature requests direct-entry midwives to establish standards of education and experience to practice as a midwife and to present those standards to the next regular legislative session. On line 24, it states the Legislature of Montana finds it reasonable and necessary to maintain the current status of the direct-entry midwives in the state until the 1991 regular session. The Sunrise law requires that to establish professional boards you must file an application by July 1 preceding the regular legislative session. This issue was determined following that date. That was a court action which barred one midwife in Missoula County from continuing practice. This is the reason they were unable to come forward with the necessary legislation to create such a board. He also referred to the matter of exemptions from licensing requirements. He called the committee's attention to the reference to exemption of the practice of Christian

Science, with or without compensation, and ritual circumcisions by rabbis. He feels that is clearly a religious exemption. He said this concerns him in terms of individual freedom and rights of people in this state. Rep. Peck referred to Page 4, line 16, the amendment they provided which adds as an exemption the practice of direct-entry midwifery. He added that the act is effective upon passage and approval. Rep. Peck provided further details relating his personal interest in this bill. He told of a case involving a midwife practicing in Missoula for approximately 11 years. She had hospital privileges and she has now been enjoined by the court from continuing that practice. The finding of the court did not rule lay midwifery legal or illegal, but the court did give the Legislature a charge by saying "the Legislature"s future actions concerning legislation now pending before it will illuminate this court as to the future of lay midwifery in this state". He believes this bill is a response to the district court's statement in that opinion that prohibited Dolly Browder from continuing the practice of midwifery. He believes the most important subject of the bill is that important basic fundamental right of freedom of choice of a mother to have a child delivered at a location and by whom she prefers. Of even greater significance is the religious consideration associated with this bill. Midwives are licensed in Montana, but it is also provided that they must work under the direction of a doctor. He does not believe they are allowed to accomplish deliveries outside the hospital, which creates a problem in that respect. He further pointed out the obstetrical crises in Montana.

Senator Hager announced that both Proponents and Opponents would be allowed forty-five minutes for testimony.

List of Testifying Proponents and What Group they Represent:

Patricia Hennessy, M.D.,
Mary Stranahan, D.O., St. Ignatius
Lilly Tuholske, read letter from William A. Gromko,
M.D., Missoula
Pamela Shore, read letter from Greg Rice, M.D., Libby
Dolores R. Browder, Midwife, Missoula
Catherine Goodman, Self, Missoula
Leslie Fellers, Midwife, Whitefish
Teresa E. Snyder, Missoula
Sarah Cobb, August Public Health Nurse
John Whiston, Attorney, Missoula
Thomas Lee, Representative, House District #49
Mikelann Caywood-Baerg, Certified Nurse-Midwife,

Livingston
Brant Goode, R.N., Missoula
Kaye Ann Brown, M.S.P.H., Ph.D. Candidate, Livingston
Roberta Gehrke, C.N.M., Livingston
Karla Court, R.N., Great Falls
Debi Corcoran, Austin, Lewis & Clark County
Chris Richards, Billings
Dr. Thomas Ferguson, Optometrist, Missoula
Jack Tuholske, Attorney, Missoula
Michael Fellers, Whitefish
Bruce Morris, Missoula
Catherine Schuck, Missoula
Kris Zimmermann, Bozeman
Debbie Dominick, Kalispell

The following persons submitted written testimony in support of HB 458, but did not testify due to time limitation:

Anne Kolesar, Prof. Counselor, Butte (Exhibit #11)
Jeanne Moone, Seeley Lake (Exhibit #12)
Cynthia Swidler, Occupational Therapist (Exhibit #13)
Donald R. Beans, Nurse and Acupuncturist, (Exhibit #14)
Marian Green, St. Ignatius (Exhibit #15)
Roger and Kathryn Holt, Havre (Exhibit #16)
Robert and April Meyer, Havre (Exhibit #17)
Mary Hay, Missoula (Exhibit #18)
Sally T. Greiser, Ph.D., Missoula (Exhibit #19)

List of Testifying Opponents and What Group They Represent:

Jerry Loendorf, Montana Medical Association
Patricia Englund, Attorney, Self
Dan Johnson, M.D., Gynecologist, Helena,
Judy Driscoll McDonald, M.D., Missoula
Sharon Dieziger, Montana Nurses Association
Jim Ahrens, Montana Hospital Association
Cindy Kaiser, Certified Midwife Nurse, Butte
Lee Tolstedt, Montana Medical Association Auxiliary

Testimony:

Patricia Hennessy, M.D., advised that she graduated from Georgetown University School of Medicine in 1975, and came to Montana with the Public Health Service to the Flathead Indian Reservation in 1977, where she was in general practice until 1981. In May she will receive an advanced degree in Public Health, which is a specialty in the bridge between the clinical and social aspects of medicine. Its perspective is to use our resources to promote health and prevent disease. Public Health presents itself to what is best for the population. Midwifery comes from the term "with the

woman". She emphasized that birth is a natural physiological event. She stated that the most recent vital statistic data for Montana show that midwife-attended births have less than 30% of the low birth weight incidence that physicians have. She stated recent research by social scientists suggests that the self-imposed educational regimen of lay midwives is very similar to that of midwives who are licensed. She stated her most recent position has been as a supervisor of a program to help low income women get prenatal care while they are being helped to find a doctor. She further informed that the Montana Academy of Family Practice indicated that 60% of their members are giving up obstetrics. She stated there are disagreements among physicians on many issues. She believes that creative solutions come from having to solve these conflicts. She stated the Montana Medical Association and American Medical Association would never have you believe that they speak for all physicians. She stated this bill is a simple effective piece of legislation that serves in the public health interest of the citizens of Montana. She presented written testimony to the committee (Exhibit #1).

Mary Stranahan, a general practitioner in St. Ignatius for six and one-half years, stated that she and her partner average between 80 and 100 births a year. She believes that midwifery, including lay midwifery, has an important role to play in the health care system of Montana. There is currently a health care crises in the obstetrics field, but even without that crises there is a niche for the practice of midwifery in the state. More and more women are making the choice to have their babies at home. She stated that during her practice she has had several occasions to share patients with lay midwives, and she stated she has always been impressed with their care. This gives credit to the educational efforts of the midwives. From her personal experience and from what she has read, she believes midwives spend a significant amount of time screening their patients throughout the pregnancy for any complications. The practice of the art of midwifery is in the emotional support through pregnancy, the expertise of home delivery, and the recognition of when the patient should be in the hospital. Home birth, attended by a midwife, is not for everyone, but the choice of that option should be made available in Montana.

Lilly Tuholske, Missoula, stated she was here to read a letter from Dr. William Gromko, a partner in Family Practice Missoula, who was unable to attend. She read

the letter to the committee and submitted it (Exhibit #2).

Pamela Shore stated she is a nurse and also an attorney. She appeared today to read a letter from Dr. Greg Rice, a Board Certified Family Physician in Libby. She read and submitted the letter to the committee (Exhibit #3).

Dolores R. (Dolly) Browder stated she is a direct entry midwife from Missoula, who has been in practice there for the past 11 years. During that time she has attended 300 births. Her training includes a teaching certificate from the University of Washington and a three-year apprenticeship program in training with midwives. This apprenticeship included training by doctors, nurses, and certified nurse midwives. She stated when she started training 11 years ago, there were no schools for direct entry midwives as there are now. She is a product of her community's demand for home births and midwives. There were no doctors who would attend home births at that time; there were no certified nurse midwives, and parents were unhappy with standard hospital care. She stated she is a traditional midwife, embracing the time wise techniques the midwife possessed, and she also learned the new technology that was available for some birthing mothers. The blending of the old and the new philosophy and education about childbirth is such an advantage because childbirth is so natural and a psychological experience for a woman. She stated in her practice she screens out people and she refers patients to physicians. She stated she does not do episiotomies, does not use forceps, and does not use drugs to start labor. She stated she takes low-risk women who want to have natural childbirth at home. In her statistics of 300 births, she has 0 maternal deaths and 0 infant deaths, and 4% caesareans. She discussed the issue of emergency. She grouped emergencies in three categories (1) women who need to be transported to a hospital in a fast manner (in 300 births over 11 years she has had only 1); (2) women who need to be taken to a hospital within a period of 30 to 60 minutes (in 300 births over 11 years she has had about 4 that could be put in that category); (3) women who need to go to a hospital but there is no immediate rush; this is the category most of her so-called "emergencies" fall into. She believes it clearly shows that natural childbirth can be facilitated well with a midwife present. A midwife's expertise in helping a mother feel relaxed and confident lessens the real emergency. She added that childbirth is a rite of passage for a woman and her family. She said the

World Health Organization says "where existing legislation presents a barrier to the promotion of traditional health practices, it should be repealed or amended and ultimately replaced by supporting legislation". She stated that during Montana's centennial year she hopes this piece of legislation will be an honorable way to clarify the choice of midwives to the state's citizens. She believes this represents an enhancement to maternal and child care at a time when our state is experiencing a greater need for childbearing health care. She urged passage of HB 458.

Professor Catherine Goodman, University of Montana Physical Therapy School, stated she received her undergraduate degree in 1976 from the University of Pennsylvania and a Master's Degree in Business Administration in 1986 from the University of Montana. She advised she has just completed a collaborated textbook which will be the first medical textbook for physical therapists. She advised she is expecting her second child and is planning a home birth. She provided details concerning the hospital birth of her first child which she termed emotionally devastating for her and her husband. She summarized by stating she wants the choice of a birth at home. She asked for support of HB 458.

Leslie Fellers, a direct entry midwife from Whitefish, stated in 1980 she attended a midwifery school in Texas which offered a program of academic study and clinical experience. She attended 60 supervised births. She has been a midwife in Montana for 7 years, and has attended 200 births with no maternal deaths or fetal deaths. She stated she does not work with high-risk women. She stated 93% of the women who begin labor at home birth at home. When parents consent to have a midwife attend their child's birth, and a midwife consents to work with the parents, the law should provide for this. She asked the committee to vote for HB 458.

Teresa E. Snyder stated she is a Butte native who received her Bachelor's Degree from the University of Maryland in 1974 and her Master's Degree from Montana State University in 1979. She stated she has published in several professional journals and is currently co-authoring a textbook. She stated she is a member of the Montana Nurses Association and she strongly disagrees with the position her professional organization has taken on this issue. She stated she is in support of HB 458. She stated her choice to have a home birth was based on many years of direct

experience working in hospitals and on extensive study of available medical and health-related literature concerning pregnancy and childbirth. She stated that studies have indicated that fetal distress, infection, maternal hemorrhage and infant birth injury are significantly lower in midwife attended home births compared to hospital births. As a health care educator and provider she seeks the best possible health care for her family, and she believes parents should have the right to choose such care. She requested that skilled assistance by midwives be available in the state of Montana, and asked support of HB 458.

Sarah Cobb advised that she has a four-year nursing degree and lives in rural Augusta. She has worked as a Public Health Nurse for about 5 years. Since October, 1988, she has worked as a Public Health Nurse for Augusta and surrounding regions. Her work experience includes obstetrics in the hospital. She and her husband attempted home birth with their first child. She ended up in the hospital with a caesarian section. Both experiences were good. As a rural nurse she makes many home visits, and has been working with expectant mothers and families. In that area some families have had home births on their own; some have had lay midwives in attendance; some families have had certified nurse midwives in a hospital setting, some have had general practitioner doctors, and others have chosen obstetricians. Each family chose the birthing experience they felt comfortable with. Each family took the responsibility of their choice. She teaches prepared childbirth classes and does one-on-one home visits teaching nutrition, exercise and other helps. She stated she follows pre-natal and postpartum care, with a focus on all family members. She believes each family has a right in the choice of the birthing experience. She asked the committee to keep this choice accessible for the people of Montana.

John Whiston, stated he was graduated from Yale University, and attended Montana University School of Law, and has lived in Missoula for approximately 15 years. He stated he was one of the attorneys who represented Dolly Browder in court within the past few months. He advised he wished to make himself available to the committee for any questions they might have about that case. He added he wished to emphasize that the judge in that case did not indicate that lay midwifery is legal or illegal. All that was stated is that based on the exemptions that presently exist in the law, Dolly Browder, in the judge's opinion, was practicing medicine. The judge further stated that "the

Legislature cannot continue to put its head in the sand". Mr. Whiston advised his plea today was to give the legal community the guidance they need, ie explicit declaratory law stating that midwifery is legal. He stated that because he was an advocate in the Browder case, he could not be a witness, but he wished to testify today regarding Ms. Browder's expertise, based on personal experience gained through the birth of his child. He believes it would be a crime if she is susceptible to criminal penalties for that expertise and caring which she demonstrated. He added that he was presenting a list of 250 signatures of residents of his legislative district who support HB 458.

Representative Thomas Lee, House District #49, related his personal experiences involving home deliveries and a hospital delivery. The point he wished to make is that the people who avail themselves of home births are not just thinking of the birth event. They consider the medical evaluations and all the various aspects that pertain to the approaching event. In his personal circumstances, he greatly appreciated the services of a midwife. He urged the committee's concurrence of HB 458.

Mikelann Caywood-Baerg, a certified nurse-midwife, stated she is in private practice in Livingston and has full hospital privileges at Livingston Memorial Hospital, and also at the Sweetgrass Community Hospital in Big Timber. She does both home births and hospital births and has practiced in Montana for five years. Her C-section rate is about 4%; she has done 150 births in the last four years, 68 of which have been at home; she has a zero maternal mortality and zero infant mortality. She told of her impressions while administering the first certifying examination for the Colorado Midwives Association. From this first-hand experience she witnessed the high qualifications of those taking the examination. She also commented regarding safety and transport time and gave her reasons for believing this was not a valid concern.

Brant Goode, R.N., Missoula, stated he is a MNA member who worked on this bill. He presented a list of names of health professionals from throughout Montana who support direct entry midwifery and home birth.
(Exhibit #4)

Kaye Ann Brown, Master of Science in Public Health, stated she had two children delivered by a certified nurse-midwife. She urged support of HB 458. (Exhibit #5)

Roberta Gehrke, CNM, of Livingston, stated she has been a nurse for 33 years. She submitted written testimony (Exhibit #6).

Karla Court, R.N., practicing in Hingham for ten years in Obstetrics, urged support of HB 458.

Debi Corcoran stated she is a resident of Lewis and Clark County for the past 10 years and has three home-birth children. She refuted testimony that children born at home are low birth weight. She requested support of HB 458.

Chris Richards, Billings, stated that due to economic depression in their area many are finding themselves without the option of seeking the services of a doctor. She urged passage of HB 458.

Dr. Thomas Ferguson and wife Barbara stated they are having a home birth and asked the committee's support of HB 458.

Jack Tuholske, Attorney, stated he is the father of three boys born at home. He stated Montana is a state that prides itself on freedom, and he believes the citizens deserve the freedom to decide where to have their children.

Michael Fellers, Whitefish, stated that he and his wife have had one child born in a hospital under the care of an obstetrician, the second they had at home alone, and the third was born with a midwife in attendance. Their overwhelming choice for a birth situation is with a midwife in attendance. He asked for support of HB 458.

Bruce Morris, Missoula, Montana Carpenter's Union, advised that he has four children who were born at home attended by midwives. He said he speaks as a proponent for HB 458 since he feels it is a fundamental right of parents to be able to choose how and where to have their children.

Catherine Schuck, school teacher from Missoula, stated her husband is a nurse in Missoula. She stated they are planning a home birth in July, and asked for support of this bill.

Kris Zimmermann, Bozeman, stated she and her husband have two children born at home with a midwife in attendance. They appreciate the opportunity of having their

children being born at home and support passage of HB 458.

Debbi Dominick, Kalispell, stated she chose a home birth but ended up in the hospital. She observed the midwife and the doctor had a very good working relationship. She asked the committee to support HB 458.

Jerry Loendorf, Montana Medical Association, in responding to some of the comments made by the sponsor and the proponents, stated that if we examine the laws of the State of Montana as they regulate all health care professions we find they were enacted for the health and safety of the people of the state. Throughout those laws we find two requirements (1) the person purposing to perform the service has received sufficient education and training so that they can safely provide that service; (2) that there is some type of regulatory agency that can take from that population people who prove to be incompetent. Midwife bills have been before this legislature at least three times, but there has never been an occasion where they sought to impose any adequate standards upon themselves in terms of education. He believes that is the reason the legislature has always rejected these bills. HB 458 provides a definition of midwifery and refers to the advising, attending and assistance of a woman during pregnancy, labor, natural childbirth or a postpartum period. He stated he cannot tell specifically what all that means, but the testimony indicated it was perhaps a limited service. In court records he found that the judge had restrained a midwife involved from injecting drugs. The midwife's sworn statements contained admissions that she had carried drugs to the homes she went to, obtained some of these drugs from a midwife in the state of Texas, and on occasion used them and even on one occasion took a prescription drug from one patient who had pills left over and gave them to another patient. He had no information as to the extent these incidents occur. He also noted the court prohibited the midwife from doing episiotomies, which is the surgical procedure, so he assumed there was some evidence somewhere in that record that an attempt was made to do that procedure. A further examination of the sworn statement indicates she learned midwifery from other midwives. From that it seems she would not be the only person involved with either drugs or episiotomies - the things the court prohibited. He questioned the definition of natural childbirth. This bill also mentions some personal rights that might be expanded, but the body of the bill says nothing about religious rights or personal rights.

What it does is give a group of people a right to perform a service who have demonstrated neither training, education or background to do so. He discussed the issue of "rights". It has been argued that the court decision did not rule that midwifery was legal or illegal. However, he pointed out there is no definition of midwifery in Montana law. What the court ruled is that what midwives were doing was practicing in areas they were not licensed to practice in. They did not attempt to define midwifery, leaving that for the legislature to do. If a bill authorizing midwives to perform services in Montana is ever enacted, it should follow the form of all the other laws, ie the legislature determine what the required education and training should be, and set up an agency to see that people who perform services have the proper qualifications. This bill allows anyone who wants to call herself a midwife to practice so-called midwifery. The bill in effect allows a person who is judged to be unqualified to practice obstetrics, go back and practice again under the term midwifery. He further stated that the argument that people will practice midwifery anyway should not be a reason for enacting the bill to allow this practice. During testimony, it was said studies indicated various things about midwives. According to Mr. Loendorf, the state of Montana does not really have the information to compile studies because there is no regulation in the area. People are operating outside the law, he believes, and consequently that information is unavailable. He pointed out that it is questionable whether the studies concern trained nurse midwives who practice in other states, or untrained midwives who perform in the state of Montana. In regard to participation of nurse midwives in the Obstetrical Program at the Johns Hopkins Hospital in Baltimore, he provided information that indicated only certified nurse midwives are permitted to deliver babies and provide prenatal care at that facility (Exhibit #20). He concluded by stating that the baby and the mother are not chattels; they are something very precious. The legislature regulates many things, but in dealing with people it should be most careful and should not pass legislation that is not in people's best interest and does not insure their health and safety.

Patricia Englund, stated she is appearing in a private capacity, and added that she was one of the lawyers on the other side in the court case in Missoula. She spoke of the requirements of licensure for all other professions which have impact on the health of the people of Montana, and that it is not proffered here in

the case of midwives. She stated that the health care for mothers and babies at a critical period is of sufficient importance that it too should be licensed and regulated before it is legally permitted. Midwives want the benefit of an exception to Section 37-3-013 but they have not been willing to accept the burdens that all the other professions have shouldered. The freedom of choice is an emotional argument, but not a logical one. That same argument could apply to any of the licensed professions. She advised there are not only parent rights -there are fetal rights. They are the rights of the unborn baby and the newborn baby. According to Ms. Englund, the lay midwives who are submitting this bill have not demonstrated yet that they are capable of providing that quality of care that the Montana babies deserve. She stated that Montana midwives sometimes deliver babies as far as 45 minutes away from a hospital. That can create serious complications and prejudice both to the mother and to the child. Between 10% to 15% of pregnancies develop some sort of complication, without warning, and some of those complications have a three to four-minute response time. She told of her personal experience whereby her baby's life was saved because of the availability of life-saving equipment and her physician's expertise. Such care is not available at home delivery with an unqualified, unregulated lay midwife. She stated there are also risks of maternal or fetal hemorrhage. She emphasized the rights of the child are a serious consideration. She stated she has another concern as a citizen and that is when a problem develops in the course of a delivery with a lay midwife, the state of Montana will be the entity subject to pick up the tab. The state institutions will be charged with negative results, if there is a brain-damaged child or a mother who needs to go on disability. The lay midwives do not carry malpractice insurance, and the insurance companies will not insure them. That means the state must bare the cost. She concluded by stating that Montana cannot afford the risk of lay midwifery on the terms that are proposed in HB 458, which is total lack of regulation. She urged a do not pass recommendation.

Don Johnson, a board certified gynecologist, in private practice in Helena, stated he is not appearing to argue about the quality of prenatal care that can be provided by lay midwives versus certified nurse midwives versus an obstetrical/gynecologist. What he wished to address is the rights of the fetus and the newborn infant. He stated he has had experience with hospital deliveries, deliveries with certified nurse midwives, and home

deliveries. He added he can relate to the committee the critical time within a newborn's first minutes as to the dramatic change that can occur in the status of the newborn if some detrimental problems develop rather quickly. You do not have 45 minutes, 60 minutes, or even 15 minutes to transport that newborn baby to a hospital. He/she very possibly needs immediate resuscitative efforts that are only provided in a hospital and not in a home setting. It may be said that is a small percentage, which in reality is about 4% to 5% of normal term infants. He emphasized that the newborns of the state of Montana deserve the maximum quality of care at that critical time of their lives. It is their choice, but they cannot speak to us. They are brought into this world at the expense of their immediate creche - the labor environment. He acknowledged that labor is a normal process in the vast majority of cases. However, there is a critical point in time where necessary intervention may be required and it may represent a very small percentage, but for that infant it is 100%. During those first few breaths that baby may need oxygen, suction of its airway, or other types of support not readily available in a home environment. The standards of care that society has adhered to in regard to prenatal and postpartum care have been referred to and the certified nurse midwives are very familiar with those standards. There is a distinct difference in the standard of care required between lay midwives and certified nurse midwives. He believes the children of Montana have rights, and the newborn infants have rights and they should be provided with the best quality available. He urged opposition to this bill and requested they vote no on HB 458.

Judy Driscoll McDonald, stated she is a Butte native and a family practitioner who provides prenatal care and delivery services in Missoula. She advised she is proud of her work and proud of her willing cooperation with the Health Department's ACCESS/LINKS program. She stated she is speaking in opposition to HB 458. She read and presented her written testimony to the committee (Exhibit #7).

Sharon Dieziger, Montana Nurses' Association, stated she wished to speak in opposition to HB 458. She believes HB 458 attempts to set up a double standard in the state of Montana. Physicians and Nurse Midwives educated in prenatal care and deliveries are required to maintain a standard of care, scope of practice, licensure and/or certification, accountability and liability. She believes it is inconceivable the Legislature is being asked to sanction the right for

anyone who chooses to do so to establish themselves as a lay midwife without even basic education or preparation. She read and presented her written testimony to the committee (Exhibit #8).

Jim Ahrens, President of Montana Hospital Association, advised that this legislation affects the hospitals. He stated he has been around the state attending a series of seminars about the issue of obstetrical care in Montana. He stated the obstetrical crises is a concern. He stated he wished to address some points: (1) as an Association, they have over 100 pieces of legislation which they are following which directly or indirectly affect them. It has been his observation that whenever the Legislature determines there is a problem or a concern, they meet it head on and enact legislation or regulation. This is a strange piece of legislation because all concerned say there is a problem, but nothing will be done until 1991. (2) As hospitals, they are concerned about whom they will deal with. If at some point in time, some of the babies will be presented to the hospitals, who do they deal with in the intervening months. (3) He believes hospitals will become the deep pocket. If there are any suits, he does not believe it will be a midwife who will be sued but rather the hospital. Therefore, he proposed an amendment stating that hospitals and licensed medical practitioners who receive the consequences of direct entry midwives in birthing procedures which are subsequently transferred to the hospital's care be immune from liability (Exhibit #9). He believes this is a simple but basic request.

Cindy Kaiser, C.N.M., stated she has practiced in Butte for 12 years and added that all her births are hospital attended. She stated she wished to address the "whereas" - "Whereas, the practice of direct entry midwife has been practiced in the state of Montana since territorial days; and whereas, it is the intent of the Legislature to allow direct entry midwives to continue serving Montana parents without fear of criminal prosecution." She stated this is our Centennial year and there have been great strides made in the past 100 years in the care of mothers and babies. She quoted from a textbook, copyright 1884, which physicians had available to them when they were delivering babies back in the "territorial days". The Preface was written in 1871, and it expressed the author's concern about the number of mothers and babies dying because medical interventions had been delayed, and had earlier interference been more widely taught and practiced, maternal and fetal mortality would have

been greatly diminished. She pointed out that even in those days an effort was being made to upgrade the practice of midwifery, for in those days the obstetricians were the midwives. She feels that passing HB 458 would be a great injustice just to satisfy a few who yearn to experience the romanticism of the wild west. She stated HB 458 is a regressive measure. According to Ms. Kaiser, direct entry midwives lack accountability which give them free reign to practice as they choose. She stated if one mother or one baby dies over the next two years because of this bill, it has accomplished nothing. With passage of this bill there would be no reason for Certified Nurse Midwives to maintain their standard of care. She addressed the issue of direct entry concept for any profession which had always required a license. She asked why would any of those professionals choose to be licensed if lay midwives are allowed to practice.

Lee Tolstedt, Montana Medical Association Auxiliary representative, which group consists of over 700 spouses of physicians, stated her group is opposed to HB 458 mainly because the bill calls for no accountability to anyone on the part of the direct entry midwives.

Questions from Committee Members:

Senator Lynch asked that if this bill does not pass, then in two years would a bill requiring qualifications be presented. John Whiston stated that his knowledge goes back to Ms. Browder's situation. He stated when he was first contacted by Ms. Browder that the Midwives Association had been in the process of talking about how to regularize and police itself, and had been doing that for several years. Ms. Browder testified before the Governor's Commission on Obstetrical Services, and then two weeks later this case blew up.

Senator Lynch questioned Ms. Browder concerning qualifications, training, etc. He specifically asked if all midwives have EMT training. She stated some do, all of them have the Red Cross CPR card, they have experience in infant resuscitation, they take continuing education classes on a yearly, monthly basis. She stated all the midwives she knows belong to a national organization called MANA (Midwives Alliance of North America). She stated it is a requirement in the Montana Midwifery Association that members continue to re-educate themselves.

Mikelann Caywood-Baerg, C.N.M., Livingston, advised that she

would like to add that there are some individuals who might want to enter into the profession of midwifery without training. However, after attending one or two births, they realize their lack of experience and most quit. She believed those individuals are few and far between.

Senator Himsl asked if parents choose a home delivery for whatever reason and if a doctor will not make a home delivery, then the Certified Nurse Midwives would not be able to make a home delivery, what is the course of action for these parents.

Jerry Loendorf stated he was not sure what the parents must do, but he believed the reasons a doctor would not deliver at home was because as safe a place cannot be provided for a delivery, and consequently to deliver there may be basis for malpractice. Senator Himsl stated that the parents actually have no choice in the matter of where the child should be born.

Senator Pipinich stated in a large segment of his District there is no obstetrician. He said he has a large file of letters supporting this bill. He asked Mr. Loendorf what is the answer for an area such as this.

Jerry Loendorf advised that if midwifery is allowed, it should be done through setting standards. These standards would protect the people of the state by keeping out incompetent people or those who won't comply with good standards.

Senator Pipinich asked that if the legislature requires midwives to have certain training, then would Mr. Loendorf support the bill. Mr. Loendorf responded by stating that if they meet a certain criteria of training he could probably support it.

Senator Pipinich asked if Mr. Whiston could define the amount of training Ms. Browder has received. Mr. Whiston stated that evidence from the court case and from his personal knowledge he learned that midwives come from a "crafts person" tradition, whereby people are introduced to the skill in the manner of an apprenticeship. The formal education that Ms. Browder received consisted of her classes at the University. There were then in-class experiences taught by other law midwives, Certified Nurse Midwives, physicians, childbirth educators. The heart of the education is attending births with, and under the supervision of, another midwife. That went on for a period of three years. He concluded by stating that as in every other

craft one learns by doing and observing.

Senator Lynch asked if lay midwives dispense drugs. Dolly Browder, midwife from Missoula, answered that midwives do not dispense drugs per se. The only medication that midwives use is pitosin, which is only used for maternal hemorrhage after the birth. All the regulated midwives in Montana are provided with this drug. It is only used in an emergency.

Senator Pipinich asked Ms. Browder to define the tools that a midwife might use. Ms. Browder stated that she does not carry forceps or scalpel, but does carry sterilized scissors which are used to cut the umbilical cord.

Closing by Sponsor: Representative Ray Peck advised he has a memo furnished by the Department of Health and Environmental Sciences which indicates that based on their data there is no evidence that midwives are associated with infant death or LBW births to any degree different from physicians (Exhibit #10). He stated this bill is clearly a consumer-producer question. There is one thing the producers have tried to get people to believe and that is that there should be much fear associated with midwife delivery. The midwives screen their patients, and they have a record as good as those of physicians. He listed the things HB 458 would implement: (1) free choice of parents relative to the birth of their children; (2) it provides time for midwives to come back next session with proposed standards. He produced a memorandum that quotes from the Montana Academy of Family Physicians of the MMA that indicates that obstetrical services are now lacking in 18 counties and in the foreseeable future it will be lacking in 37 counties out of 56. (3) It provides protection of the First Amendment rights to the United States Constitution. Regarding free choice, some parents see drug-free labor as extremely important because it will decrease the need for resuscitation. He added that he feels one of the most crucial elements in the bill regards the low-income, uninsured mother who may opt for an abortion rather than accept delivery in a hospital, which costs approximately \$3500. The cost through a midwife would be about one-sixth of that amount. He stated the Legislature cannot continue to put their head in the sand. Passing this bill will provide the necessary interim guidance to the court in Missoula. It is very vital and fundamental. Passing this bill requires the midwives to come back two years from now, and this bill sends a clear message to all Montanans that the legislature believes in individual rights and freedom of its citizens. He urged a

positive vote on this measure.

DISPOSITION OF HOUSE BILL 458

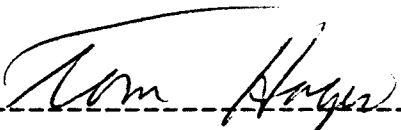
Discussion: None

Amendments and Votes: None

Recommendation and Vote: None

ADJOURNMENT

Adjournment At: 3:00 p.m.



SENATOR TOM HAGER, Chairman

TH/dq

senmindq.313

ROLL CALL

PUBLIC HEALTH

COMMITTEE

51st LEGISLATIVE SESSION -- 1989

Date 3/13/89

NAME	PRESENT	ABSENT	EXCUSED
Sen. Tom Hager	X		
Sen. Tom Rasmussen			X
Sen. Lynch	X		
Sen. Himsl	X		
Sen. Norman	X		
Sen. McLane	X		
Sen. Pioinich	X		

Each day attach to minutes.

NINEPIPE MEDICAL ASSOCIATES

St. Mary's Lake Road
St. Ignatius, Montana 59865
Telephone: (406) 745-4300

PATRICIA HENNESSY, M.D.
J. MICHAEL WISE, M.D.

SENATE HEALTH & WELFARE
EXHIBIT NO. 1
DATE 3/13/89
BILL NO. HB 458

TO: Each Montana Senator
FROM: Patricia Hennessy, M.D.
RE: House Bill 458 on Midwives

I have just completed two years organizing and supervising a low birthweight prevention program funded by the Montana Department of Health and Environmental Science. It is called ACCESS/LINKS and helps low income women obtain prenatal care, other pregnancy services and financing for their pregnancy and birth.

We have discovered that there is a group of women we can't help - those too resource rich for Medicaid (annual income of greater than \$13,000 for a family of four), yet without medical insurance. That we in the United States have so many resources yet lack basic maternity insurance coverage for mothers and future citizens is a national disgrace!

In Montana the economic downturn makes lack of medical insurance even more painful. A small number (less than 1% of Montana births) are choosing to give birth at home. From a preventative medicine viewpoint, an experienced birth attendant is far better than none at all.

Please don't make it a Montana tragedy that women are forced by difficult circumstances and your law to give birth alone. Please support H.B. 458 on midwives.

Thank you.

Patricia Hennessy, M.D.

FAMILY PRACTICE MISSOULA

631 West Alder
Missoula, Montana 59802
Telephone: 721-1850



DONALD R. NEVIN, M.D.
WILLIAM A. GROMKO, M.D.
JUDY McDONALD, M.D.
ERIC J. KRESS, M.D.

SENATE HEALTH & WELFARE
EXHIBIT NO. #2
DATE 3/13/89
BILL NO. HB 458
Diplomates, American
Board of Family Practice

March 1, 1989

Dear Senators:

My name is William A. Gromko, M. D. and I am a Family Physician in private practice in Missoula, Montana. I would like to take this time to express my support for House Bill #458.

Having worked with midwives in the Missoula, Montana area, I believe I can speak with some experience on the caring, loving service they render their patients. There are parents who deliver at home in reaction to the medical system's technology, cold attitude and expense. Whether midwives practice or not, these women will deliver at home. I believe midwives in attendance at their deliveries assures these women of some level of medical care and a portal for entry into the traditional medical system if complications arise. Midwives serve a vital service. Without midwives, women who deliver at home unattended would have higher morbidity and mortality for their infants and themselves.

House Bill #458 serves the purpose of allowing midwives to attend deliveries. It also requests the legislature to establish standards of practice, education, and experience for midwives in the future.

I wholeheartedly support House Bill #458. If I can be of further help, please let me know.

William A. Gromko
William A. Gromko, M. D.

WAG/ms

LIBBY CLINIC

GREGORY A. RICE, M.D., F.C.
BOARD CERTIFIED IN FAMILY PRACTICE

GLENNE S. GÜNTHER, M.D.
BOARD CERTIFIED IN FAMILY PRACTICE
AND INTERNAL MEDICINE

MICHAEL GATZKE, P.A.-C

KENNETH BOGART, P.A.-C

March 10, 1989

SENATE HEALTH & WELFARE

EXHIBIT NO. #3

DATE 3/13/89

BILL NO. HB 458

Honorable Members of the Senate Public Health Committee

My name is Doctor Greg Rice. I am a Board Certified Family Physician in Libby, Montana. My apologies for not being able to find coverage for my medical and OB practice today; otherwise I would be here in person.

I have practiced in Libby for the past 12 years. During that time I have helped care for over 1400 expectant mothers and have attended over 800 births. I have worked with 6 different lay midwives and one certified nurse midwife.

There is a real need for midwives in Lincoln County. There are approximately 250 expectant mothers who give birth each year. Of these about 10% or about 25 seriously consider home birth and 15 to 20 actually have home births. There are no physicians who attend these home births. The only help these women get during their births are from midwives. A special example in Lincoln County is an Amish community of about 30 families. Most of their births are at home, at least two hours from the nearest hospital. I am not as knowledgeable about the rest of the state, but when I talk with other health care providers around the state there seems to be a similar frequency of home births. Women for various powerful reasons are and will continue to have home births in Montana. They want and need the services of midwives.

The seven midwives with whom I have worked have been very competent and conscientious. There have been no deaths, no injuries, and no significant complications in home births attended by midwives in Lincoln County. In fact I have seen several cases where serious complications have been avoided because of the conscientious care given by midwives. Midwives who attend home births are an important part of health care in Montana.

For the sake of the Montana families who choose home birth, I urge you to support H.B. 451.

Sincerely,



Greg Rice M.D.

February 25, 1989

SENATE HEALTH & WELFARE
EXHIBIT NO. #4
DATE 3/13/89
BILL NO. - HB 458

To Montana Senators:

We, the undersigned health care professionals, wish to declare our support for H.B. 458 on midwives and our opposition to efforts by the Montana Medical Association, the Montana Nurses Association, and the Montana Hospital Association to prevent passage of this bill. In light of the current crisis in access to adequate health care for childbearing women, we find it incomprehensible that these organizations would oppose expanding options for pregnant women. Such opposition appears to contradict any interest in promoting our state's health and well-being.

We believe the issue is to how best to fill the growing gap in access to adequate care for childbearing women. Lobbying against well-trained and experienced midwives does nothing to fill the gap, it only widens it.

We believe the position of these professional organizations should reflect the realities of the crisis and not political alignments. Such alignments narrow the perspectives of the organizations in the best position to help solve the crisis.

We ask that you recognize that any attempts to oppose alternatives in health care are not in our state's best interest and that you vote yes on H.B. 458.

Respectfully yours,

Brant Goode, RN/BSN, Missoula

Signature	Printed Name and Title	City	Zip Code
<i>Nancy Kolberg</i>	Nancy Kolberg ^{MIDWIFE ASSISTANT}	LIVINGSTON, MT	59047
<i>Lynda Roberts</i>	Lynda Roberts ^{L.P.N.} Midwife assistant	Livingston, MT	59047
<i>Mekelann Aywood-Burg</i>	Mekelann Aywood-Burg ^{certified nurse-midwife} com -	Livingston, MT	59047
<i>Robert Geneke</i>	ROBERTA GENEKE ^{CNM}	Livingston, MT	59047
<i>Sara P. Kennedy</i>	Sara Kennedy ^{licensed Registered Occupational Therapist}	Bozeman, MT	59101
<i>Mar Jo Herron</i>	Mar Jo Herron ^{RN} Prof 421	Corwin Springs, MT	59021
<i>L. Pollack</i>	LAWRENCE POLLACK ^{MD.} Box 40	Livingston, MT	59047
<i>Merie Bouma</i>	MERIE BOUMA ^{MEDICAL ASSISTANT} Box 1344	LIVINGSTON, MT	59047
<i>Frances Hines</i>	FRANCES HINES	GARDNER, MT	59030

Signature

Printed Name and Title

City

Zip Code

Gillian Wellonen

GILLIAN WELLENEN

MEDICAL ASSISTANT

LIVINGSTON

59047

Kaye A. Brown

M.S.P.H. (Master of Science in Public Health)

Livingston

Ph.D. Cand. - Hospital & Health Care Adm.

59047

Mother - Twice delivered by a C.N.M.

Michael Brown

Michael Brown, M.D.

Livingston

59047

Marilyn Kujawa

Marilyn Kujawa RN

602 Meadowlark Ln

Livingston

59047

The following names are those of health professionals from throughout Montana who support direct entry midwifery and home birth. Those with ** by their names are Montana Nurses Association members supportive of H.B. 458.

Carol Reeves, RN
 David Whelehon, DC
 Hilary Daily, ND
 Karla Court, RN
 Anna Christine Elliot, RN **
 Nola Chandler, RN **
 Barbara Frey, RN
 Lou Sage, DC
 Joseph Weydt, MD/CERP
 Mary Stranahan, DO
 Judy Tapfer, RN **
 Beth Schenk, RN **
 Sheila Johansen, RN **
 Jennifer Doores, RN **
 Killeen Nielson, RN **
 Catherine Goodman, RPT
 Melodee Belangie, BSW
 Karen Klotz, OTR
 Teresa Turnbull, RN/C
 Brant Goode, RN **
 Vicki Dundas, RN **
 Teresa Snyder, RN/MSN **
 Alice Carroll, RN **
 Rolland Ellis, RN **
 Gregory Fine, RN
 Melanie Myllymaki, LPN
 Britt Finley, RN
 Thomas J. Clucas, Ph.D.
 Carol Savage, RN **
 Pamela Nelson, SN
 Sarah McNeerney, RN
 Phillip Simon, RN
 Pat Hennesy, MD
 John Nilsen, RDH
 Alexandra Paisley, RN **

Jerry Swassord, DC
 Tim Binder, ND
 Judy Carlson, RPT
 Debra Parchen, RN **
 Debra Hastings, RN **
 Nancy Clark Keener, RN **
 Alameda Ransey, RN
 Ellyn Jones, MD, FAAP
 Daniel Schneider, RN **
 Thera Cooper-Williams, RN **
 Butch Turk, SPN
 Naomi Lev, RN **
 Susan Printz, RN **
 Karen Somerset, RN **
 Becky Prillamen, RN **
 Joanne Theel, LPN
 Rodney Babcock, DC
 Kevin Keskeny, OTR
 Jamie VanHorssi, FNP-C
 JoAnne Foley, RN **
 Jay Baldwin, RN **
 Erica Brown, RDH
 Donna Boyer, LPN
 Neva M. Oliver, RN/NP
 Lynda Thur-Fine, RN **
 Ardella Fraley, RN/MN
 Doris Henson, RN/MPH
 Cheryl Olson-MacMillan, RN/MSN **
 Robert Ciampa, RN **
 Jean Matthews, RN
 Chris Jasper, RN
 Bruce Hardy, MD
 William Gromko, MD
 Karen Stinger, RN/MSN **

SENATE HEALTH & WELFARE
 EXHIBIT NO. #4(A)
 DATE 3/13/89
 BILL NO. HB 458

A short summary of this list includes physicians and osteopaths who work in a variety of settings including obstetrics, family practice, pediatrics and emergency medicine; 28+ registered nurses who are MNA members opposing the MNA executive boards position on H.B. 458 including professional nursing instructors; others including Licensed Practical Nurses, nursing students (2), certified nurse practitioners, chiropractors (4), occupational therapists, physical therapists and other health professionals.

(This sheet to be used by those testifying on a (EXHIBIT NO.))

#6

DATE 3-13-89NAME: ROBERTA G. ENRKE, CNMBILL NO. HB/458DATE: 2/13/89ADDRESS: Bx 854 Livingston, MT. 59047PHONE: 222-6800SENATE HEALTH & WELFARE
EXHIBIT NO. DATE 3/13/89BILL NO. HB 458REPRESENTING WHOM? Self for pro NB 458APPEARING ON WHICH PROPOSAL: NB 458DO YOU: SUPPORT? AMEND? OPPOSE?

COMMENT: Midwife coverage in many counties of MT
can fill the gaps left by MD's (60 of 120) who are
afraid of insurance Co.'s malpractice fees &
going without insurance. If legal these
midwives can be covered by MD's who are
now afraid to back the unlicensed MW.
many counties in MT are without any OB care
this is dangerous to Mothers & Babies!

The lay midwife is the heritage of all OB
Care whether performed by MD / RN or CNM --
if we can protect the endangered species
of animals -- do not the midwives who
protect Mo & Babe deserve it as well!

PLEASE LEAVE ANY PREPARED STATEMENTS WITH THE COMMITTEE SECRETARY.

FAMILY PRACTICE MISSOULA

631 West Alder
Missoula, Montana 59802
Telephone: 721-1850



DONALD R. NEVIN, M.D.
WILLIAM A. GROMKO, M.D.
JUDY McDONALD, M.D.
ERIC J. KRESS, M.D.

SENATE HEALTH & WELFARE
EXHIBIT NO. #7
DATE 3-13-89
BILL NO. HB 458
Diplomates, American
Board of Family Practice

I am Judy McDonald, a physician from Missoula who speaks in opposition to House Bill 458. It is my opinion that the state should not exempt direct entry midwives from the Medical Practice Act.

My experience as a physician providing pregnancy care and delivery services combined with my experience as a delivering mother have lead me to form a strong opinion about this issue.

My own prenatal care and delivery services were provided by a fine nurse midwife whose dedication and philosophy remain an inspiration to me. My second child was born at term in a non hospital based birthing center. She was an unusual infant with a congenital defect in the electrical conduction system of her heart who manifested severe heart problems shortly after birth while presenting no warning signs in labor. She required immediate cardiopulmonary resuscitation after delivery. I am therefore a woman whose own infant born out of a hospital required intensive medical intervention and I know from first hand experience how extraordinarily difficult such a situation is.

Although extensive preparation for possible resuscitation events had been attempted at this center many serious weaknesses existed because of lack of experience with severely ill newborns. My daughter is a well seven year old now but I am only too well aware of how great a role luck plays in this outcome.

Infant resuscitation is a difficult procedure requiring a great deal of experience, training and team work. It is not possible to predict with certainty during labor which infants will require resuscitation. It is not physically feasible to provide adequate resuscitation without access to medications, oxygen delivery systems, and sophisticated medical equipment. Use of these resources should be regulated by the Medical Practice Act.

Although medical technology as applied to infant care may seem harsh and uncaring to the uninitiated, as it indeed did to me even after completing a medical residency, my own experience with my daughter on a respirator in a Spokane hospital convinced me that a warm and loving heart stands behind hospital neonatal units.

I feel very strongly that the burden of proof of safety in delivery of birth services lies with the provider. The pregnant family can not realistically be expected to be able to judge the competency of those providing services.

I feel the state has the responsibility to insure that those providing delivery services can also provide immediate care to those infants needing resuscitation or other neonatal medical services. Providing oxygen and access to transportation to a hospital is not adequate protection for a needy newborn who may require a response within moments.

Judy McDonald

TESTIMONY (No more sheets at registration table).

~~VISITORS' REGISTER~~

SENATE HEALTH & WELFARE

EXHIBIT NO. #5

COMMITTEE DATE 3-13-89

BILL NO. HB 458

BILL NO. _____

DATE _____

SPONSOR _____

NAME (please print)	RESIDENCE	SUPPORT	OPPOSE
Kaye Ann Brown, 422 S. Main St. Livingston, MT 59047 (406) 222-1050 Wife of Michael C. Brown, M.D. Diplomate, American Board of Family Practice Livingston (same address & phone)	M.S.P.H., Ph.D. Cand. (M.S. in Public Health - UCLA Ph.D. - Hospital & Health Care Admin.) - Univ. of Minn.)		
Comments:			
We have had two home births with a midwife for the following reasons:			
1. To allow my husband to be a husband-father-coach, and not impeded by hospital staff's expectations of him as a "physician".			
* 2. To avoid the risks associated with hospital regimentation and "protocols" (fetal monitoring, administration of drugs, and observance of a strict "time frames" within which certain things "have" to happen			

IF YOU CARE TO WRITE COMMENTS, ASK SECRETARY FOR WITNESS STATEMENT FORM. ETC.

PLEASE LEAVE PREPARED STATEMENT WITH SECRETARY.

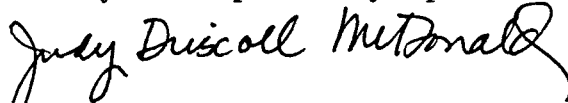
(over)

are a succession of routine procedures which
These protocols, take the place of common sense
and the kind of human caring that we sought
from a well-trained midwife. Actually, the
protocols are substituting a systems approach
for what should be a natural and spontaneous
process — if it's simply allowed to take place
in a natural and spontaneous manner.

I would urge you to familiarize yourself with the American Heart Association's Textbook of Neonatal Resuscitation to enable you to understand the protection Montana's newborns deserve. There are many reasons Montana achieved 1985 neonatal mortality rate of 5 deaths/1000 infants compared with neonatal death rate of 20.5/1000 in 1950. Preparation for neonatal resuscitation is one important reason for this progress.

I urge this committee to vote against House Bill 458. Exempting direct entry midwives and allowing them to establish standards within 2 years leaves the most vulnerable groups of Montanans unprotected. Our newborns deserve this state's assurance that those persons providing delivery services have professional training, proof of resuscitation skills meeting the standards of the American Heart Association and malpractice liability coverage.

Thank you for this opportunity to express my opinion.



Judy Driscoll McDonald

Judy McDonald, M.D.



Montana Nurses' Association

P.O. Box 5718 • Helena, Montana 59604 • 442-6710 SENATE HEALTH & WELFARE

Senator Hager and Members of the Committee

(17.7)

EXHIBIT NO. # 8

DATE 3-13-89

BILL NO. HB 458

My name is Sharon Dieziger and I represent the Montana Nurses' Association.
I am here to speak in **opposition** to **HB 458**.

HB 458 certainly attempts to set up a double standard in the state of Montana. Physicians and Nurse Midwives educated in prenatal care and the delivery of babies are required to maintain a standard of care, scope of practice, licensure and/or speciality certification, accountability and liability. It seems inconceivable that the Legislature is being asked to simply ignore all standards and sanction the right for anyone who chooses to do so to establish themselves as a lay midwife without even basic education or preparation.

We have heard that pregnancy is not an illness. Going to a barber for a hair cut or a beautician or cosmetologist is not considered an illness either, but this state requires educational preparation, examination and licensure of these practitioners. Can anyone say that the birth of a child is a less significant event?

HB 458 establishes no board or governmental authority to oversee the practice of midwifery.

In considering this legislation, it is our position that the focus should be on mother and child. The territorial day standards of midwives are not sufficient and a mother and child should have the protection provided by current Montana law.

If this type of legislation passes, it surely could set a precedence in the state of Montana to open doors for a whole variety of people to seek legislation to exempt themselves from current laws and practices.

To appear before this Legislature without any assurance to you or the public that there is even a desire to establish educational standards, define their scope of practice, seek licensure for sanction of practice, is incomprehensible.

We sincerely urge to to vote **NO** on **HB 458**.

RECEIVED

MAR 02 1989

BIRTH

Barb F.Y.I.
Missoulian editorial
2-77-89

Proponents of home birth are naive

By SUSAN DUFFY
of the Missoulian

Any woman who chooses to have her baby at home simply because she seeks a more loving, cheerful, comfortable birth setting than is available in a hospital is incredibly naive.

When I first tried to write that sentence, I used the word "fool," but these women are not fools. They are the kind of women who wouldn't dream of putting a cigarette between their lips for the full nine months of pregnancy and who would think more than twice before having a half-glass of wine during that period. Most are women for whom I have great respect.

Let me make it clear that in this column I am speaking only of women who choose to give birth to their child at home, not of women who have babies at home because they can't afford to check into a hospital. It is one of our country's great shames that we have not remedied that state of affairs.

Yes, I know, hospitals are a drag. The staff wakes you up at weird hours. The rooms are bland, at best, as is the food. Your visitors are regulated. The beds are strange.

What hospitals do have that homes do not are blood banks, operating rooms, suction machines and a host of other items that are not among the things most people associate with giving birth. Most mothers will never see or hear a word of them during their delivery or afterward.

But some will.

When I say that women who choose home birth are naive, I can relate to that naivete. In our heart of hearts, each of us believes that babies born with life-threatening problems are born to other people. We continue to believe this until it happens to us.

It happened to me and my husband when our oldest daughter was born. Her saga has been a long string of what-ifs that eventually turned out

well, but it is very plain to us that had she not been born in a hospital, she would not have lived.

If there is anything we learned from that experience it is that parents must be vigilant regarding their children's medical care, and that that care begins before birth, continues during birth and goes on long afterward.

One rallying cry by supporters of unlicensed midwives in our state has been that women have the right to give birth to their babies in any way they see fit. What bothers me about that statement is that it's so adult-oriented. What about the baby? It's generally conceded that being a good parent often means putting your child's needs before your own. In giving birth, the goal is to bring a healthy child into the world — for the child's benefit, if not your own.

Another rallying cry of local supporters of midwifery has been that childbirth is a natural event, not an illness requiring medical intervention. I'll buy the first part — none of us would be here without it — but I am compelled to note that, just as naturally, some babies will be born whose fetal development went haywire along the way, and some babies will have trouble making it through the normal birth process. Those babies are going to need all the technological and human help they can get.

Because medical capability has increased so enormously in the past 20 years, perhaps we have forgotten what it was like when we didn't have it. Women on the frontier didn't give birth without doctors because they didn't want them; they gave birth without doctors because there weren't any available. If you look at family plots in a century-old cemetery, you'll find a lot of very young children buried in them.

Even when my mother was expecting me 40-odd years ago, it was common for physicians to caution parents-to-be against investing in large quantities of baby gear before the birth —

just on the chance that the baby might not live.

Today, advertisements for baby goods bombard expectant parents through the mail months before any baby has arrived. We expect, and mostly get, thank heaven, healthy babies.

But once you become a member of the "other people" to whom the unimaginable has happened, you are forever changed in your outlook. Since my daughter was born, I have met hundreds of "other" mothers across the country. To a woman, they believe that opting for a home birth is irrational — and that is the very kindest word I've heard used.

To spend time in a neonatal intensive care unit is to finally comprehend that anything that can go wrong between conception and joining the human race in the light will, at some time, go wrong. It is also to become a believer in miracles, to understand that it truly is a miracle when any child is born healthy, to know that it is a miracle when those born unhealthy get well enough to go home.

I am no starry-eyed believer in the ability of technology and medical personnel to cure or heal all ills. That is impossible. Some babies simply cannot be helped. But what parent-to-be who fully comprehends the miracle of life would ever gamble that soon-to-arrive life and its well-being on the probability that rapid, informed medical intervention will be unnecessary?

Some of this area's strongest supporters of home birth are people who never in a million years would take any action that might harm their unborn child. Yet these same people, who wouldn't dream of missing an appointment with the pediatrician for the child's vaccinations against measles and polio, are willing to risk giving birth miles away from a hospital.

Perhaps "naive" is not a strong enough word after all.

Susan Duffy is assistant features editor at the Missoulian.

(21.3)

SENATE HEALTH & WELFARE
EXHIBIT NO. #9
DATE 3/13/89
BILL NO HB 458

House Bill 458

Page 5, Line 8

Following: Line 7

Insert: "New Section. Section 3. Immunity from Liability

Licensed Medical Practitioners, Nurse Specialists, Nurses, and Licensed Health Care Facilities shall not be liable for the direct consequences of care commenced by a direct-entry midwife in birthing procedures, which are subsequently transferred to their care."

Renumber subsequent sections

SENATE HEALTH & WELFARE
 EXHIBIT NO. # 10
 DATE 3-13-89
 BILL NO. HB 458

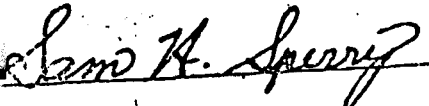

May 27, 1988

TO : Dr. Espelin

FROM: Sam Sperry 

SUBJ: Montana Resident Live Births And Infant Deaths By Attendant At Birth: 1980-1986

For the attached tables and graphs:
 This certifies that the foregoing is a true and correct copy of the original certificate on file with the Mont. Department of Health and Environmental Sciences.


 Sam H. Sperry, Chief
 Bureau of Records and Statistics
 Date 11-28-88 By 

Physician indicates delivery with a physician in attendance regardless of the place of delivery.
Midwife indicates delivery with a person in attendance who used the title CIM or M-W or "midwife" or "mid-husband", regardless of the place of delivery.
Other indicates delivery with a person in attendance who did not use a title. These births typically occur at a residence. We believe that these births are attended by "lay" midwives who have the father or some other family member sign the certificate as certifier and attendant.

A. During 1980-1986, 96 % of Montana's resident births were attended by physicians with the delivery occurring in hospital.

There is, however, a definite trend toward midwife-attended deliveries occurring out of hospitals. In 1980, 91 % of these births were in hospital and in 1986 the figure had dropped to 72 %.

B. Of 862 resident infant deaths in Montana during 1980-1985:

- 97 % were attended by physicians at birth.
- 1 % were attended by midwives at birth.
- 2 % were attended by others at birth.

These percents are the same for births not resulting in infant death.

C. Of 862 resident infant deaths in Montana during 1980-1985:

46 % were delivered LBW.

Of these 46 %:

- 97 % were attended by physicians at birth.
- 1 % were attended by midwives at birth (actually 0.3 %).
- 2 % were attended by others at birth.

D: Reference attached graphs:

Page 1. A definite downward trend in percent of LBW births for midwife-attended deliveries.

The apparent increase in this percent for other-attended deliveries since 1984 may be due to small numbers.

Page 2. The percents on page 1 are indexed at 1980 on this graph. It is evident that midwife-attended deliveries are experiencing much more rapid improvement with respect to LBW births than either of the other two categories of attendants.

Page 3. There is a slight, visual hint in this graph that mothers experiencing LBW births are seeking prenatal care a bit farther into pregnancy than those experiencing normal-weight births.

Pages 4-6. These are percent distributions for the month prenatal care began by attendant category. Midwife-attended deliveries appear to exhibit the same experience as physician-attended deliveries. The relatively high percents of "no care" and "unknown month" for other-attended deliveries may reflect poor reporting.

Pages 7-9. These are percent distributions of total number of prenatal visits by attendant. Midwife and physician experiences appear identical.

E: Conclusions:

On the basis of this relatively superficial look at the data, we see no evidence that midwives are associated with infant death or LBW births to any degree different from physicians, with the possible exception noted for Page 1 and Page 2 under D, above.

F: Recommendation:

Part of the difficulty we are experiencing in detecting differences in attendant-related births as they affect LBW and infant death lies in our not knowing what to look for. I believe that it would be of great benefit to both our bureaus if we could schedule a few sessions over the next month or so in which you would provide me and my statistical staff with some medical instruction regarding the perinatal period and, perhaps, the months preceding this period. I would appreciate your serious consideration of this. We can certainly use your help.

SENATE HEALTH & WELFARE

EXHIBIT NO. #11

DATE 3/13/89

BILL NO. HB 458

To: Human Services Committee, Montana Senate

From: Anne Kolesar, Licensed Professional Counselor
615 S. Jackson
Butte, MT 59701
782-5129

I request that the following letter be read into the minutes of the hearing on HB 458.

I strongly support passage of HB 458 as an interim measure to protect the right of Montana women to chose the place and the circumstances of the births of their children. I hope that in 1991 we will see a bill providing for licensure of lay midwives, setting standards of training and experience.

As I write this letter I am holding my newborn son in my arms. Although typing with one hand is slow, I feel it is important for me to share my experience with you. Coming from a traditional medical family--my father is a doctor, my mother a registered nurse--I "hedged my bets" when I became pregnant last year. I had regular prenatal care with a Certified Nurse Midwife in Butte and underwent all the recommended tests. At six months, when I was satisfied that all was well with the pregnancy, (and after having listened to numerous tales of dissatisfaction from women who'd delivered at St. James Hospital with the aging, often rude, local obstetricians) I sought out Dr. Willow Moore, lay midwife, Naturopathic Doctor, and licensed chiropractor, in Bozeman. Thus during the last trimester of my pregnancy, I had both traditional and alternative care.

The differences were notable. The C.N.M.'s office was impersonal. I was often left to wait alone 15 minutes or more after undressing. She talked to me in exactly the same tone she would have used for a scared 16-year-old, although I am 36 and have several degrees. She called me "Mom" and liked to tell me what "Doctor" would say about "Baby." In at least one case, she gave me wrong information. Dr. Moore, on the other hand, works in a warm, homey setting, with a large lending library of baby and health books. She never left me wait in her examining room. She took the time to get to know me as an individual. We worked together to prepare me for the natural and thrilling process of normal childbirth. Dr. Moore's knowledge of current obstetrical practices was most impressive.

During what was a rather difficult labor, Dr. Moore and her assistants stayed with me, physically and spiritually. I felt at all times supported and safe. While emergency equipment was available, there were no unnecessary clinical interventions, no impatient doctors trying to speed things up, no harsh words or bright lights. My son was placed on my breast as soon as he emerged; he remained there for the rest of the night. We were both treated with the utmost respect and care. Two weeks later,

he is as calm and relaxed as an infant can be, and I am fully recovered. I feel a lasting bond with Doctor Moore; unlike an obstetrician, she didn't "deliver" my baby to me, instead she empowered me to bring him into the world myself.

I feel so strongly about home birth that if the right to choose that option were taken away from me in Montana, I would leave the state to have my next child. Birth is not an illness. I will not go to a hospital to bear a child. Please recommend passage of HB 458 in 3the Senate.

Anne Kolesar

Box 8
Seeley Lake, MT 59868

February 27, 1989

SENATE HEALTH & WELFARE

EXHIBIT NO. #12

DATE 3/13/89

BILL NO. HB 458

To whom it may concern,

I am writing to urge you to vote for HB 458. I speak from personal experience when I say the choice of a lay midwife attending home birth is a choice Montana families need to have.

My 5 year old daughter was born here in our home with a lay midwife in attendance. My personal research on birth indicates fear is the greatest disruption to a safe birth. I personally would have great difficulty overcoming fear in a hospital birth setting, due to numerous memories of hospital experiences in my past.

The midwife who worked with myself and my family provided us invaluable assistance and reassurance. Her attention to my pregnancy and the health - mental, emotional, physical and spiritual - of our entire family throughout this transition in our family life is something we will always cherish. She LISTENED for hours to ascertain our needs for a safe and joyful experience. She referred us to additional professionals for the medical assistance we needed. Her lending library alone was an invaluable tool to us in our preparation for birth! There was no comparison for care that the doctor I saw - with his 5 minute - monthly appointments - could offer me.

Because of the possibility of a home birth attended by a lay midwife, the birth of my daughter was a healthy natural wonder! - as birth was meant to be experienced.

I am very appreciative of modern medicine and technology and thank God for its availability in medical emergencies. Childbirth is not usually a medical emergency.

Please - again I urge you to vote for HB 458 and assure Montana families the choice to experience "natural" childbirth.

Thank you for your consideration

Sincerely,

Jeanne Moon

SENATE HEALTH & WELFARE

EXHIBIT NO. #13

DATE 3-13-89

BILL NO. HB 458

March 11, 1989

Senate Committee
H.B. 458

Dear Sirs and Madames:

As a health-care professional and prospective parent, I strongly believe that H.B. 458 merits support. This bill broadens the scope of practices from which families can choose when seeking pre- and post-natal care, and when birthing new family members. To imply that a single, dominant system (in this instance, allopathic medicine) is the only system of merit, fully negates the value of a multiplicity of long-standing and well-structured practices, such as midwifery. This is not to criticize allopathic medicine, or hospitals and the dedicated people who work in them. There will always be enough individuals who choose an allopathic model and enough women who choose to have their babies within a hospital. Having worked as a health-care professional for the past ten years, however, has reinforced to me that no single system, formula or remedy will work for everyone. Midwifery is a legitimate alternative, providing opportunity for individual choice, in keeping with one's own needs and philosophies.

Sincerely,

Cynthia D. Swidler, OTR/L

Cynthia D. Swidler, OTR/L

Registered, Licensed Occupational
Therapist

SENATE HEALTH & WELFARE
EXHIBIT NO. #14
DATE 3/13/89
BILL NO. HB 458

Feb. 23, 1989
482 Electric Ave.
Bigfork, Montana
59911
(406) 837-5757

Re: H.B. 458

To Whom It May Concern,

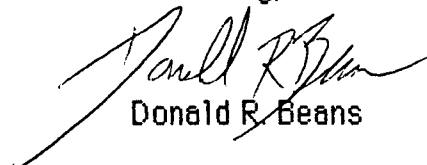
I am a 4 year degree nurse licensed in the state of Montana for 11 years. I have worked in the nursing field in surgery and mental health. I have also been licensed and maintain a practice in acupuncture in Montana. This license was issued in 1980.

I have over the past 11 years attended 8 home births in which the primary provider was a midwife. The level of skill which I observed during these deliveries was of the highest calibre. The caring attitude of the practitioner and the supportive environment of the home are two reasons I think people choose this form for bringing children into the world.

I believe that it is not within anyones right to deny access to this type of quality care. A parent, who bears the ultimate responsibility for a childs welfare should have the right to choose how and where and under who's care that child is born.

Based on my training and experience I am in full support of house bill 458 and urge you to vote for its passage.

Sincerely,


Donald R. Beans

February 26, 1989

SENATE HEALTH & WELFARE

EXHIBIT NO. #15

DATE 3/13/89

BILL NO. HB 458

Dear Senator

Surely we don't have to be coerced into going to a doctor everytime we want to have a baby! The birthing of a baby is definitely not an illness. The right to choose where and who we, as parents, to be present at such a special time should be our decision.

The midwife who was in attendance at the birth of our second child was very qualified. She taught, informed, and trained me for the birthing process. I would have a midwife again if we were to have another child.

Please support H.B. 458. We, as parents, have the capacity to make intelligent choices.

Thank you,

Marian Green

Marian Green
13900 Watson Road
St. Ignatius, MT 59865

SENATE HEALTH & WELFARE
EXHIBIT NO. #16
DATE 3/13/89
BILL NO. HB 458

February 23, 1989

Dear Senator

We are the parents of five children, three of whom have been born at home. We are heartily in support of House Bill 458 concerning the future of midwives in Montana.

Our midwife was very knowledgeable and competent in not only the practical aspects of prenatal care and delivery, but also in the psycho-emotional aspects of pregnancy and birth. She was sensitive toward our desires to have positive, family-centered birth experiences and our spiritual reasons for desiring home births, while at the same time carefully monitoring the physical details of each pregnancy. She got to know us as a couple and a family, which greatly enhanced the birth experience for all of us. We were very pleased with the sensitive, quality care she provided. We would definitely have a home birth with any future children.

We believe that conscientious, informed and responsible parents have a right to choose where to birth their children, since we believe birth is a private family-bonding experience and rarely a medical emergency.

Sincerely,

Roger & Kathryn Holt

Roger and Kathryn Holt
525 Second Avenue
Havre, Montana 59501

Feb. ,1989

SENATE HEALTH & WELFARE
EXHIBIT NO. #17
DATE 3/13/89
BILL NO. HB 458

Dear Senator

We are Robert and April Meyer, ages 34 and 30 respectively. Five years ago, we had a home birth with two very competent midwives. We became parents again of a lively, healthy boy who joined his (then five year old) sister.

We lived about 45 minutes away from our midwife, but we saw her almost every week during the pregnancy. We were encouraged to read everything we could get on birth and she answered every question we could come up with. Our five year old daughter was included in every visit, and during the birth, both of our mothers were present and made to feel very welcome. Their presence was also a comfort.

We were very pleased with the birth and the confidence we have in our midwives' skill goes without saying. After the birth the care received as well was excellent.

From our own personal experience, we feel we would definitely choose to have a home birth, with a midwife attending, for any and all future children we may have.

Robert + April Meyer

Robert and April Meyer
212 11th Street
Havre, Montana 59501

SENATE HEALTH & WELFARE
EXHIBIT NO. #18
DATE 3/13/89
BILL NO. HB 458

Dear Senator:

I am writing to urge you to support parents' rights in Montana by voting in favor of midwives.

I gave birth to my son last September at home with a midwife. When I became pregnant, it was very important to me to be able to choose the kind of natal care I wanted. I interviewed two obstetricians and one midwife and her assistant, and came to the decision that a hospital birth was not for me.

This decision to stay at home and to have a midwife attend my birth rather than a doctor was based on the belief that birth is a natural, normal event for which my body is designed; it is not intrinsically a medical event requiring the intervention of doctors. My midwife shared this belief. Her role was not to intervene, but to assist. Thus, the accomplishment of giving birth was my own.

This kind of assistance was exactly what I wanted from the caregiver I chose to attend my birth. My midwife helped me every step of the way, encouraged me, supported me, and the confidence I place in this kind of care is greater than the confidence inspired in me by interventions.

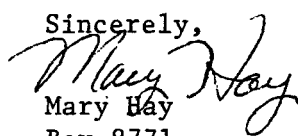
This confidence is not misplaced. My midwife constantly monitored my health and the health of my baby both throughout my pregnancy and through the birth and postpartum. During the birth itself she understood my fears and helped me through them. She helped me master the pain. She reminded me to relax, to drink, to breathe. She helped me work with my body to give birth. My son was born into a calm, welcoming environment, perfectly formed, perfectly healthy. I was up and moving about (gently) the next day, without the discomfort and pain of tears or episiotomy.

I understand that for some people having a baby in the hospital with a doctor attending is the only way they could feel comfortable and confident. But for people like me the opposite is true: I felt more comfortable and confident with a midwife and the type of care she provided.

What I am asking of you, Senator, is not to exclude me and people like me from choosing the type of health care that is right for us. As Americans and especially as Montanans we value freedom. That freedom should extend to decisions about health care. A vote for the midwifery bill would preserve this freedom.

Thank you for your time and attention.

Sincerely,


Mary Hay

Box 8771

Missoula, Montana 59807



HISTORICAL RESEARCH ASSOCIATES

P.O. Box 7086
Missoula, Montana 59807-7086
(406) 721-1958
Telecopier: (406) 721-1964

Sunshine Building, Suite 307
110 2nd Street S.W.
Albuquerque, New Mexico 87102
(505) 243-6299

March 1, 1989

SENATE HEALTH & WELFARE
EXHIBIT NO. #19
DATE 3/13/89
BILL NO. HB 458

Dear Senators,


Eleven years ago, when my husband and I first discovered that we were pregnant, we set out to read about birth options available to us. As anthropologists we were knowledgeable about birthing practices around the world among non-industrialized cultures and we held certain values dear. Foremost in our minds, of course, was to bring a healthy child into the world and we did everything in our power to assure this outcome. Also of extreme importance to us was a birth situation where bonding could occur unimpeded. Studies among primate groups have documented that mothers will usually abandon infants to whom they have not bonded within the first hour of life. Our instincts are not so far removed from these although this critical need for bonding the mother-child relationship has been largely ignored in this culture. Given these concerns, we set out to find the option which would most likely promote a healthy birth without interference to the bonding process.

In comparing statistics between hospital and home births, we were surprised to learn that for the low-risk population statistics for both mothers and babies are better for home deliveries than hospitals. Furthermore, the local hospital in New Mexico had a Caesarean section rate of 43%. Armed with these statistics, and desiring a gentle, unhurried, drug-free birth, we sought a competent, well-trained midwife. Unfortunately, at the time, midwifery was illegal in New Mexico and finding a home birth attendant was extremely difficult. We were fortunate to find a retired O.B. nurse who was willing to assist. Although her care was admirable, her participation was limited due to her legal status. When I had to go into the hospital due to a retained placenta, I was admitted to the emergency room with no caregiver from whom background information could be provided because of this midwife's status and because our "back-up" doctor was out of town.

Our second and third children were born in Missoula where Dolly Browder served as midwife. We were impressed with her training and skills and her thorough prenatal and parturition care. In addition, we were grateful for her professional working relationship with the doctor monitoring the pregnancy and the knowledge that if complications arose she would accompany us to the hospital, rather than abandon us at the emergency room door.

We give thanks whenever we take time to remember the wondrous births that took place in our home. These births were possible because of women like Ms. Browder who, until recently, offered a "natural alternative" for giving birth. We would hate to think others would be deprived of this right.

Sincerely,


for Sally T. Greiser, Ph.D.



SENATE HEALTH & WELFARE

EXHIBIT NO. #20

DATE 3-13-89

BILL NO. HB 458

The Johns Hopkins Medical Institutions

Department of Gynecology and Obstetrics

Edward E. Wallach, M.D.
Professor and Chairman

February 14, 1989

Mr. Brian Zins
Executive Director
Montana Medical Association
2021 11th Avenue
Helena, Montana 59601

Dear Mr. Zins:

I am writing in response to our telephone conversation of February 14, 1989 regarding the participation of nurse midwives in the Obstetrical Program at The Johns Hopkins Hospital in Baltimore, Maryland. We permit only certified nurse midwives to deliver babies and provide prenatal care at The Johns Hopkins Hospital. All of their activities are supported by back up physicians from our Division of Maternal/Fetal Medicine. I hope this information verifies the point you raised.

Sincerely yours,

Edward E. Wallach, M.D.
The Dorothy Edwards Professor
of Gynecology

EEW/br

TO: SENATOR BILL NORMAN
 RE: HOUSE BILL 458 ON MIDWIVES.

John Whiston
 1 of 13

SENATE HEALTH & WELFARE
 HOUSE NO. PETITION
 DATE 3-13-89
 BILL NO. HB 458

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
 VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
 BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Jack R. Tuholske</i>	JACK R. TUHOLSKE	1149 Harrison	59802
<i>Pauline Keckter</i>		930 Briar	59802
<i>Bill Shea</i>	WILLIAM J. SHEA	1025 BRIAR	59802
<i>Elaine Dugas Shea</i>	ELAINE DUGAS SHEA	1025 BRIAR	59802
<i>Julia S. Schultz</i>	JULIA S. SCHULTZ	801 Poplar	59802
<i>Carol Brunner</i>	CAROL BRUNNER	1024 Taylor	59802
<i>Fred Rice</i>	FRED RICE	735 Elm	59802
<i>Marcy Watson</i>	MARCI WATSON	735 ELM	59802
<i>Madeline C. Howell</i>	MADIELENE C. HOWELL	128 55th E.	59801
<i>Carol Alette</i>	CAROL ALLETTE	1309 Howell	59802
<i>Kesa Hopkins</i>	KESA HOPKINS	328 E. SPRUCE	59802
<i>Ron O'Leary</i>	RON O'LEARY	1309 Howell	59802
<i>Valerie A. Bashor</i>	VALERIE A. BASHOR	1110 1/2 Jackson	59802
<i>Carol A. Mitchell</i>	CAROL A. MITCHELL	1032 Harrison	59802
<i>Richard Goldsmith</i>	RICHARD GOLDSMITH	701 Locust	59802
<i>Nancy Seldin</i>	NANCY SELDIN	715 Locust	59802
<i>Sarah McClain</i>	SARAH MCCLAIN	824 JACKSON	59802
<i>Troy Sauvage</i>	TROY SAUVAGE	1015 Cherry St.	59802
<i>Jeff R. Schroefer</i>	JEFF R. SCHROEFER	1021 Cherry St.	59802
<i>Ann Cook</i>	ANN COOK	1004 TAYLOR ST.	59802
<i>Amy Eaton</i>	AMY EATON	1240 Harrison	59802
<i>Lillian Tuholske</i>	LILLIAN TUHOLSKE	1149 Harrison	59802

TO: SENATOR BILL NORMAN

2 of 13

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Harry Eick</i>	Harry Eick	610 W Beckwith	59801
<i>Maricia Bischoff</i>	Maricia Bischoff	443 Ford	59801
<i>Jason Bischoff</i>	Jason Bischoff	443 Ford	59801
<i>Caroline Schiraneck</i>	Caroline Schiraneck	436 ⁽¹⁰²⁾ Ford	59801
<i>Sam J O'Halloran</i>		436 Ford #204	59801
<i>John Borkowski</i>		436 Ford #205	59801
<i>Kim Pree</i>		436 Ford #104	59801
<i>David Adel</i>		"	"
<i>Thomas C. Saielli</i>	Tom Saielli	" 105	"
<i>Randall J. Mauld</i>		712 W Beckwith Missouri	59801
<i>Virginia Gould</i>		712 W Beckwith Missouri	59801
<i>Cheryl Terry</i>		422 FORD APT #3	
<i>Tracy Saunders</i>		428 Ford Ms la.	59801
<i>Lori Henes</i>		429 Ford Ms la	59801
<i>Carolyn Touchette</i>		429 Ford Ms la	59801
<i>Rich Touchette</i>		428 Edly st Ms la	59801
<i>Jill Henes</i>		429 Ford S Ms la	544-1575
<i>Jim Bradford</i>		501 Ford Ms la	549-7222
<i>Debbi J. Foster</i>		501 Ford Ms la.	549-7222
<i>Lyla Needles</i>		517 Ford Ms la	543-3286
<i>Steven Drennisch</i>		526 Ford Ms la	549-9269
<i>Kayce M. Jimsrud</i>		" " " "	" "

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Elisabeth Emerson</i>	Elisabeth Emerson	516 W. Alder	59802
<i>Mary McFarland</i>	Mary McFarland	317 Turner	59802
<i>Ann Monaghan</i>	ANN MONAGHAN	318 TURNER	59801
<i>Darcy Field</i>	Darcy Field	303 Turner	59801
<i>Stefani Gray</i>	Stefani GRAY	313 Turner	59801
<i>Jillian Jurica</i>	Jillian Jurica	325 Turner	59801
<i>Syndy Douglas</i>	Syndy Douglas	309 Turner	59801
<i>Darcy Wilhelm</i>	Darcy Wilhelm	308 Turner	59801
<i>Janis Conn</i>	JANIS CONN	314 Turner	59801
<i>Rebecca Millar</i>	REBECCA MILLAR	219 Turner Hall	59801
<i>Tina Hanlon</i>	Tina Hanlon	218 Turner Hall	59801
<i>Karin Lehmkuhl</i>	Karin Lehmkuhl	" " "	"
<i>Robert Knutson</i>	Robert Knutson	205 Miller Hall	59801
<i>Sandi Kastoff</i>	Sandi Kastoff	217 Turner Hall	59801
<i>Julie Grover</i>	Julie Grover	216 Turner	59801
<i>Jeanne Stratton</i>	Jeanne Stratton	216 Turner	59801
<i>Daniel Aleffler</i>	DANIEL ALEFFLER	3602 Stephens #3-8 Parkside Village	59801
<i>Matt Van Fleet</i>	MATT VAN FLEET	3824 Mount	59801
<i>Sandra J. Rothfus</i>	Sandra J. Rothfus	213 TURNER Urd M	59801
<i>PJ Hennessy</i>	PJ HENNESSY	230 UNIVERSITY	59801

TO: SENATOR BILL NORMAN
RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Robert Mansfield</i>	ROBERT MANSFIELD	629 Philips	59802
<i>Alvan J. Rosenthal</i>	ALVAN J. ROSENTHAL	200 Connell	59801
<i>Dwight Thomas</i>	DWIGHT THOMAS	1528 Jackson, Missoula	59802
<i>Max Gilliam</i>	MAX GILLIAM	405 SO. 6TH E. Missoula	59801
<i>Kim Kempfert</i>	KIM KEMPFERT	4185 CLARKA	59801
<i>DeAnne Kemp</i>	DEANNE KEMP	504 E. Front	59802
<i>Dave Simmert</i>	DAVE SIMMERT	122 N. Helena Ct	59801
<i>Jane Greek</i>	JANE GREEK	440 DALY #2	"
<i>Martha H Newell</i>	MARTHA H NEWELL	922 TAYLOR	59802
<i>Mary Jane Johnson</i>	MARY JANE JOHNSON	435 Beverly	59801
<i>Kurt Welborne</i>	KURT WELBORNE	1401 COOPER	59802
<i>Jeanine Flaten</i>	JEANNIE FLATEN	264 Burlington	59801
<i>David Dobrowski</i>	DAVID DOBROWSKI	1203 Cooper	59802
<i>Brant Goode</i>	BRANT GOODE	818 Grand	59802
<i>Steven Leash</i>	STEVEN LEASH	Box 9285 MSLA	59807
<i>Megan Rooney</i>	MEGAN ROONEY	Box ⁷²¹⁵ 428 MSLA	59807
<i>Florence Chessin</i>	FLORENCE CHESSIN	400 Univ. Ave.	59801
<i>William G. Dratz</i>	WILLIAM G. DRATZ	319 E SPRUCE #6	59802
<i>William G. Dratz</i>	WILLIAM G. DRATZ	533 Connell Ave	721-5597
<i>Grey Lerner</i>	GREY LERNER	#65 Dunning Hall off M MSLA	59801

6 of 12

TO: SENATOR BILL NORMAN
RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Linda Thur-Fine</i>	LYNDA THUR-FINE RN	518 N 3RD W, MISSOULA, MT	59802
<i>Gregory Fine</i>	Gregory Fine	518 N 3 W, Missoula, MT	59802
<i>Stephen Bierwag</i>	STEPHEN BIERWAG	501 DEFOE MISSOULA, MT	59802
<i>Jack Judd</i>	JACK JUDD	1539 SHERWOOD	MISSOULA 59802
<i>Elizabeth Miller</i>	ELIZABETH Miller	1539 Sherwood	MISSOULA, MT 59802
<i>Patricia Bierwag</i>	Patricia Bierwag	501 DeFoe	MSLA MT 59802
<i>Margaret Madsen</i>	Margaret Madsen	1602 Phillips	MSLA, MT 59802
<i>Bonnie J. Duffin</i>	Bonnie J. Duffin	538 So. Caravan	MSLA 59802
<i>Laura A. Fox</i>	LAURA A. FOX	# 1110 TAYLOR	MSLA MT 59802
<i>Joy Bolton</i>	Joy Bolton	734 Monroe St.	Missoula, MT 59802
<i>Randy Bolton</i>	Randy Bolton	" " " " " "	" " " " " "
<i>Johanna J. McKinney</i>	JOHANNA J. MCKINNEY	1428 Van Buren	MSLA 59802
<i>Bonnie J. Rusk</i>	Bonnie J. Rusk	1319 Van Buren	MSLA, MT 59802
<i>Duane Rusk</i>	Duane Rusk	1319 Van Buren	MSLA MT 59802
<i>Don Ferguson</i>	DON FERGUSON	1936 Birch	MSLA/MT 59802
<i>Mercedes Litfin</i>	Mercedes Litfin	125 E. Beckwith	MSLA, 59801
<i>Bob Zingmark</i>	BOB ZINGMARK	125 E. Beckwith SAME	MSLA 59801
<i>Evelyn Young</i>	Evelyn Young	1001 Pullman #1	MSLA 59802
<i>Raymond H. McMillan</i>	RAYMOND H. McMILLAN	1428 Harrison	MSLA 59802

TO: SENATOR BILL NORMAN
RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>[Signature]</i>	JUNE J. SIPLE	717 DEFOE MISSOULA MT	59802
<i>[Signature]</i>	GREG SIPLE	717 DEFOE, M.S.A., MT	59802
<i>[Signature]</i>	59802
<i>[Signature]</i>	59802
<i>[Signature]</i>	CYNTHIA BRAUN	1301 Phillips - Msla	59802
<i>[Signature]</i>	MICHAEL E. BARTON	1608 Phillips, Msla	59802
<i>[Signature]</i>	ANN MARY DUSSEAU	1933 Phillips	59802
<i>[Signature]</i>	Cynthia Sharp	706 Howell	59802
<i>[Signature]</i>	Dorothy Clapper	714 Myra	59802
<i>[Signature]</i>	John Clapper	'1	'1
<i>[Signature]</i>	JULIA H. ROBERTS	700 Defoe	59802
<i>[Signature]</i>	EVA SEITZ	722 Howell	59802
<i>[Signature]</i>	John Seitz	722 Howell	59802
<i>[Signature]</i>	Mary Burton	1026 Kennett	59802
<i>[Signature]</i>	BOB ORKS	1026 KENNETT	59802
<i>[Signature]</i>	CHRIS TONKINSON	722 Locust St.	59802
<i>[Signature]</i>	John Pierce	73 Locust St	59802
<i>[Signature]</i>	G. BRUCE MORRIS	128 S. 5 th E.	549-4039

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Barbara Ferguson</i>	BARBARA FERGUSON	742 S. Higgins	59801
<i>Thomas Ferguson</i>	Thomas Ferguson	742 S. Higgins	59801
<i>Dolores R. Brauden</i>	Dolores R Brauden	200 Woodworth	59200
<i>Margaret Vance</i>	MARGARET B. VANCE	417 Beverly	59700
<i>Todd C. Kaye</i>	TODD C. KAYE	417 Beverly	

TO: SENATOR BILL NORMAN
RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
Jay Baldwin	Jay Baldwin - RN	816 Cowper	59802
Jo Ann Foley	Jo Ann Foley - RN	" "	59802
Theresa Snyder	Theresa Snyder	731 E. Beckwith	59801
R.C. Snyder	RC Snyder	731 E. Beckwith	59801
Lisa McInerney	Lisa McInerney	111A Craighhead	59801
Frank Laskos	FRANK LASKOS	1505 Phillips	59802
Martha Laskos	Martha Laskos	" "	59802
Sally J. Strom	Sally J. Strom	130 Jefferson	59802
Carolyn Beck	Carolyn Beck	825 Hazel	59801
Jake Kastle	Jake Kastle	699 S E W	59801
Cheryl Mitchell-Olds	Cheryl Mitchell-Olds	1616 Maurice	59801
Leonard Devaney	Leonard Devaney	8214 800 Daly	59801
Kate Hanson	Kate Hanson	806 locust	59802
Katherine Hubbard	Katherine Hubbard	PO Box 2265	

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature Printed Name Address Zip Code

Dorothy Woods Dorothy L. Woods 1615 Sherwood 59802

Mrs. Mrs. E. Van Schick Elmer & Shirlee Van Schick 3024 Old Pond Rd 59802

Lewis J. Thomas Lewis THOMAS 636 EUROPA Ave 59801

Edith Denny Edith Denny 140 W. Sussex 59801

Charles F. Tieman CHARLES F. TIEMAN 502 E. Sussex 59801

Shirley V. Tieman Shirley V. Tieman 502 E. Sussex 59801

Robin R. Brown ROBIN R. BROWN 520 Dearborn 59801

Joyce L. Hocker JOYCE L. HOCKER 115 University 59801

Jane Suddendart Jane Suddendart 316 Blake 59801

Doug Campbell 1618 Sherwood 1618 Sherwood 59801

Alisa E. Campbell " " " " " "

John B. Whiston John Whiston 1615 Sherwood 59802

11/13

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Dan Dahlberg</i>	DAN DAHLBERG	417 BLAINE	59801
<i>Harriet Eichenholz</i>	Harriet Eichenholz	440 Eddy	59801
<i>Emilie Loring</i>	EMILIE LORING	500 Daly	59801
<i>Karyn Collins</i>	Karyn Collins	441 Keith	59801
<i>Robin L. Thompson</i>	Robin L. Thompson	400 Evans Ave	59801
<i>Sallie Scott</i>	Sallie Scott	2106 Hilda	59801
<i>Gerard G. Fetz</i>	Gerard FETZ	2106 Hilda	59801

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
Robin Inez Wall	Robin Wall	235 E. Sussex	59801
Janet M. Bush	Janet Bush	402 N. 3rd W.	59802
Karen Rehard	Karen Rehard	1607 Missoula Ave.	59802
Katie Stack	Katie Stack	301 E. Sussex-MsLA	59801
Jacky Norris	Jacky Norris	310 E. Sussex-MsLA	59801
Abbott Norris	ABBOTT NORRIS	310 E. SUSSEX MSIA	59801
Bruce Carlson	Bruce Carlson	237 E. Central	59801
Kerry Carlson	Kerry CARLSON	237 E. Central	59801
Kenneth S. Wall	Kenneth Wall	235 E. Sussex	59801
Janet Hulme	JANET HULMES	501 E Central MsLA	59801

TO: SENATOR BILL NORMAN
RE: HOUSE BILL 458 ON MIDWIVES.

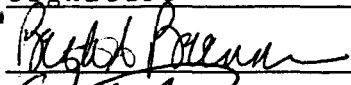


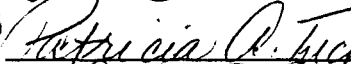

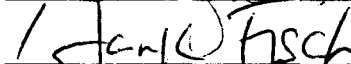
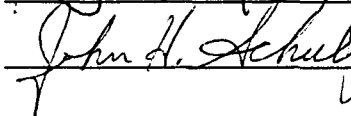
AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Gera H Goode</i>	GERA H. GOODE	643 E. Bedwith	59801
<i>Melodie Belangie</i>	Melodie Belangie	418 Day	59801
<i>Marianne English</i>	1327 ^{Marianne} Jackson English	1327 Jackson	59802
<i>Tracy Stone</i>	Tracy Stone	515 N 4th W	59802
<i>Katherine A. Mae Milen</i>	KATHERINE A. MAE MILEN	424 1/2 MADISON	59802
<i>Rebecca Hansen</i>	Rebecca Hansen	837 A St.	59807
<i>Helen McMenamin</i>	Helen McMenamin	230 University	59801
<i>Susan Carlson</i>	Susan Carlson	921 West Spruce	59802
<i>Garry Carlson</i>	Garry Carlson	921 West Spruce	59802
<i>Ellie Nuno</i>	Ellie Nuno	927 West Spruce	59802
<i>Brad Hutcheson</i>	BRAD HUTCHESON	1306 Tinker	59802
<i>Ralph C Wilson</i>	RALPH C WILSON	415 E FRONT ST	59802

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
	BETH A. BRENNAN	1533 Jackson	59802
	WILLIAM A. ROSSBACH	1533 JACKSON	59802
	Steven Chord	811 Hilda	59802
	Patricia A. Tucker	794 794 Hastings	59801
	Carolyn Black	1020 Cherry	59802
	HANK FISCHER	1534 Mansfield Ave	59801
	JOHN H. SCHULTZ	801 Poplar	59802

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
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BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>THWK</i>	THOMAS W. King	325 Woodworth	59801
<i>Carol Fran King</i>	Carol Fran King	325 Woodworth	59801
<i>David L. Pozzi-Johnson</i>	David L. Pozzi-Johnson	516 North Ave. East	59801
<i>Linda Johnson</i>	Linda Johnson	607 E. Central	59801
<i>David Johnson</i>	DAVID A. JOHNSON	607 E CENTRAL	59801

TO: SENATOR BILL NORMAN
RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
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BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>Don Herberger</i>	DON HERBERGER	1615 Howell Box 5535	59806
<i>Scott Smith</i>	SCOTT SMITH	1440 SUNFLOWER	59803
<i>Gisela Herberger</i>	Gisela Herberger	PO. BOX 5535 ← 59806 (1615 Howell)	59802
<i>Anna Jones</i>	ANNA JONES	1631 Howell St	59802
<i>Robert Jones</i>	Robert Jones	1631 Howell	59802

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature	Printed Name	Address	Zip Code
<i>David Zinger</i>	David Zinger	604 Toole Ave.	59802
<i>Sue Silverberg</i>	Sue Silverberg	722 N. 5th West	59802

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
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Signature Printed Name Address Zip Code

<i>Susanna Myer</i>	Susanna Myer	630 Blaine	59801
<i>Cynthia Swidler</i>	Cynthia Swidler	425 E. Sussex	59801

TO: SENATOR BILL NORMAN

RE: HOUSE BILL 458 ON MIDWIVES.

AS RESIDENTS OF SENATE DISTRICT 28 WE ASK YOU TO
VOTE YES ON HOUSE BILL 458 ON MIDWIVES AS PASSED
BY THE HOUSE.

Signature Printed Name Address Zip Code

~~Kim L. ...~~
Mary T. Huston Mary T. Huston 336 S 6th W MSIA 59801
Michael Kantor Michael Kantor 238 Burlington MSIA 59801

COMMITTEE ON Senate Public Health

VISITORS' REGISTER

NAME	REPRESENTING	BILL #	Check One	
			Support	Oppo
Cindy Kaiser, RN	self, 798 W. Gold Street - Butte	H.B. 458		X
Barry F. Lochridge	SELF, 37 Jefferson St. - Bozeman	HB458	X	
Josie Lochridge	self 17 Jefferson Ct. - Boz.	HB458	✓	
Catherine Goodman	self 2246 Hillside Missla	#B 458	✓	
May Shaul DO	self START. Dixon Mt.	HB458	✓	
Mary Bradshaw	Box 90 Dixon Mt.	HB458	✓	
Patricia Englund	self - 1038 1/2 12th Ave, Helena	HB458		X
Cheryl Nitchel	2742 Footherill rd. Kalispell	HB458	✓	
Beth Brown	P.O. Box 1841 Kalispell	HB458	✓	
Dianne Handrup	self 710 Kelley Rd Col Falls	HB458	✓	
Juliette Brunel	self Augusta	HB458	✓	
Maie de Maque Rhodes	226 6w Whitfish	HB458	✓	
Sarah Howe Cobb	Box 289 - self - Augusta	HB458		
Richard Neal	2050 S 8th Missla	HB458	✓	
Janet & Jerry McGahan	Box 71 Arley 59821	HB458	✓	
Mary Anne Brown	1410 3rd Ave No St Falls	H458	✓	
Carla Green	499 1/2 Marshall St	458	✓	
Bob Woodland	" " "	"	X	
Claire E. Trauth	400 Kootenai Ct, Stevensville	458	X	
Karen Hotz	215 Florence Missula, 59801	HB458	X	
Jerry Schneider	215 FLORENCE. MISSLA 59801	"	✓	
Mary Frances Brown	304 E Frankln missla 59801	HB458	X	
James Conkin	2915 Duncan Dr Missla	H458	X	
Jannine Hiten	267 Burlington Missla	H458	X	
Jannan M.D.	328 1/2 S 4th W. Missla	H458	X	
Kim Hughtart Kuehn	8305 Zang Dr Missula	H458	X	

(Please leave prepared statement with Secretary)

DATE March 13, 1989

COMMITTEE ON

Public Health

VISITORS' REGISTER

NAME	REPRESENTING	BILL #	Check One	
			Support	Oppose
AMELIA ROSE	MONTANA MNT ASSN	458	✓	
Willy Tuhalske	1149 Harrison, Missoula	458	✓	
Loaves R Browder	200 Woodworth, Msla	458	✓	
Kristin Richard	944 Lorraine Billings	458	✓	
Harmon Diezinger	MT Nurses Assoc	458		✓
Debra Ferguson	742 S. Higgins MSLA	458	✓	
Teresa E. Snyder	731 E. Berkwith Msla	458	✓	
Linda Roberts	1838 Bar 2264 Livingston Mt.	458	✓	
Scottie Fellars	127 Idaho Wfish, MT.	458	✓	
Barb Brant	1658 E 2nd St Wfish MT	458	✓	
Brant Good, RN	818 Grand, Missoula, MT	458	✓	
Debbie Dominick	950 Kienas Rd. Kal.	458	✓	
Michael Fellers	2140 Hwy 93w, whitfish	458	✓	
Maia Lemmer	6140 Bridge Canyon Rd Bozeman	458	✓	
Dr. Tom Ferguson	742 S. Higgins MSLA	458	✓	
Elije Campbell	M.S.C.A.	458	✓	
John Whitt	MMA	458	✓	
Gren Anderson M.D.	Pediatrician from Helena MT Hospital for Det. & Child Health			✓
Pamela Shore RN JD	MMA	458	✓	
Steve Zimmerman	3639 Trail Creek Boz., SELF	458	✓	
Kris Zimmermann	3639 TRAIL CREEK Rd Bozeman	458	✓	
Catherine Schuck	722 N. 4th W.	458	✓	
Jan Peisor	621 N. B. Livingston	458	✓	
Lucretia Gehrk, CNM	Bx 854 Livingston	458	✓	
Judy McDonald MD	sup 631 W. Alder Missoula	458		✓
Karla Court RN	2012 7th Ave N. Mt. Falls, MT.	458	✓	

(Please leave prepared statement with Secretary)

59401

DATE

March 13, 1989

COMMITTEE ON

Public Health

VISITORS' REGISTER

NAME	REPRESENTING	BILL #	Check One	
			Support	Oppos
Shereely Caldwell (Paul Doherty)	612 D 6th W, MSLA Mont Nansos Assoc	H458 HB458	X	X
Jack Tuholste	1149 Harrison MSLA	HB458	X	
Joan Schumaker	725 Longstaff	HB458	X	
Mike Lear	W. Ball, MT	HB458	X	
Leon T. Leht	528 Hazelgreen	HB458		X
Astrid Wickton	1248 S. Hills Dr.	HB458		X
Deb. Corcoran	7012 Austin Rd.	458	✓	
Nancy L. Leifer	544 Cleveland, Missoula	458	✓	
Terra Linda Leifer	"	458	✓	
Eileen E Perry	460 Boulder Rd, ^{Deer} Lodge	458	✓	
Kristin Jacobson	515 Hillside, Helena	HB458	✓	
Pamela Luoma	136 Bridger Ct. MSLA	HB458	✓	
Bruce Luoma	136 Bridger Ct., MSLA	HB458	✓	
Thomas Lee	HD 49	HB458		
Mona Janssen	Midwifery Assoc.	458	✓	
A. Bruce Morris	128 S. 5th E, MSLA; MYSELF	HB458	✓	
Louise Small	2216 Chateau Helena	458		X
William Bruce LPN	P.O. #81 WHITEFISH, MT. 59737	458	✓	
Jane Joyce	MT Women's Lobby	458	✓	
Karlotte Hordley	931 E. 2nd St. Stevensville	458	✓	
			✓	

(Please leave prepared statement with Secretary)