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DIVISION 2. HEALING ARTS [500 - 4999.129] (*Division 2 enacted by Stats. 1937, Ch. 399.*)

CHAPTER 8.2. Naturopathic Doctors Act [3610 - 3686] (*Chapter 8.2 added by Stats. 2003, Ch. 485, Sec. 5.*)

ARTICLE 5. Naturopathic Childbirth Attendance [3650 - 3655] (*Article 5 added by Stats. 2003, Ch. 485, Sec. 5.*)

3650. A naturopathic doctor may perform naturopathic childbirth attendance if they have completed additional training and have been granted a certificate of specialty practice by the board.

(Amended by Stats. 2024, Ch. 497, Sec. 42. (SB 1526) Effective January 1, 2025. Repealed as of January 1, 2027, pursuant to Section 3686.)

3651. In order to be certified for the specialty practice of naturopathic childbirth attendance, a naturopathic doctor shall obtain a passing grade on the American College of Nurse Midwives Written Examination, the American College of Naturopathic Obstetricians Examination, or a substantially equivalent examination approved by the board, and shall establish, to the board's satisfaction, compliance with one of the following requirements:

(a) Successful completion of a certificate of midwifery or naturopathic obstetrics specialty from an approved naturopathic medical education program consisting of not less than 84 semester units or 126 quarter units that substantially complies with the following educational standards and requirements:

(1) The curriculum is presented in semester or quarter units under the following formula:

(A) One hour of instruction in theory each week throughout a semester or quarter equals one unit.

(B) Three hours of clinical practice each week throughout a semester or quarter equals one unit.

(2) The program provides both academic and clinical preparation that is substantially equivalent to that provided in a program accredited by the American College of Nurse Midwives. The program includes, but is not limited to, preparation in all of the following areas:

(A) The art and science of midwifery, one-half of which shall be in theory and one-half of which shall be in clinical practice. Theory and clinical practice shall be concurrent in the areas of maternal and child health, including, but not limited to, labor and delivery, neonatal well care, and postpartum care.

(B) Communications skills that include the principles of oral, written, and group communications.

(C) Anatomy and physiology, genetics, obstetrics and gynecology, embryology and fetal development, neonatology, applied microbiology, chemistry, child growth and development, pharmacology, nutrition, laboratory diagnostic tests and procedures, and physical assessment.

(D) Concepts in psychosocial, emotional, and cultural aspects of maternal and child care, human sexuality, counseling and teaching, maternal and infant and family bonding process, breast feeding, family planning, principles of preventive health, and community health.

(E) Aspects of the normal pregnancy, labor and delivery, postpartum period, newborn care, family planning, or routine gynecological care in alternative birth centers, homes, and hospitals.

(3) The program integrates the following subjects throughout its entire curriculum:

(A) Midwifery process.

(B) Basic intervention skills in preventive, remedial, and supportive midwifery.

(C) The knowledge and skills required to develop collegial relationships with health care providers from other disciplines.

(D) Related behavioral and social sciences with emphasis on societal and cultural patterns, human development, and behavior related to maternal and child health, illness, and wellness.

(4) Instruction in personal hygiene, client abuse, cultural diversity, and the legal, social, and ethical aspects of midwifery.

(5) Instruction in the midwifery management process which shall include all of the following:

(A) Obtaining or updating a defined and relevant database for assessment of the health status of the client.

(B) Identifying problems based upon correct interpretation of the database.

(C) Preparing a defined needs or problem list, or both, with corroboration from the client.

(D) Consulting, collaborating with, and referring to, appropriate members of the health care team.

(E) Providing information to enable clients to make appropriate decisions and to assume appropriate responsibility for their own health.

(F) Assuming direct responsibility for the development of comprehensive, supportive care for the client and with the client.

(G) Assuming direct responsibility for implementing the plan of care.

(H) Initiating appropriate measures for obstetrical and neonatal emergencies.

(I) Evaluating, with corroboration from the client, the achievement of health care goals and modifying the plan of care appropriately.

(b) Successful completion of an educational program that the board has determined satisfies the criteria of subdivision (a) and current licensure as a midwife by a state with licensing standards that have been found by the board to be substantially equivalent to those adopted by the board pursuant to this article.

(Amended by Stats. 2022, Ch. 414, Sec. 8. (AB 2685) Effective January 1, 2023. Repealed as of January 1, 2027, pursuant to Section 3686.)

3651.5. A naturopathic doctor certified for the specialty practice of naturopathic childbirth attendance shall do both of the following:

(a) Maintain current certification in neonatal resuscitation and cardiopulmonary resuscitation.

(b) File with the board a written plan for the following:

(1) Consultation with other health care providers.

(2) Supervision by a licensed physician and surgeon who has current practice or training in obstetrics to assist a woman in childbirth so long as progress meets criteria accepted as normal. The plan shall provide that all complications shall be referred to a physician and surgeon immediately.

(3) Emergency transfer and transport of an infant or a maternity patient, or both, to an appropriate health care facility, and access to neonatal intensive care units and obstetrical units or other patient care areas.

(Amended by Stats. 2024, Ch. 497, Sec. 43. (SB 1526) Effective January 1, 2025. Repealed as of January 1, 2027, pursuant to Section 3686.)

3652. (a) A certificate of specialty practice in naturopathic childbirth attendance shall expire concurrently with the licensee's naturopathic doctor's license.

(b) The certificate may be renewed upon submission of the renewal fee set by the board and evidence, to the board's satisfaction, of the completion of 30 hours of continuing education credits in naturopathic childbirth, midwifery, or obstetrics. Fifteen hours may be applied to the 60 hours of continuing education required for naturopathic doctors.

(c) Licensing or disciplinary action by the board or a judicial authority shall be deemed to have an equal effect upon the specialty certificate to practice naturopathic childbirth issued to a licensee, unless otherwise specified in the licensing or disciplinary action. When the subject of a licensing or disciplinary action relates specifically to the practice of naturopathic childbirth by a licensee holding a specialty certificate, the action may, instead of affecting the entire scope of the licensee's practice, suspend, revoke, condition, or restrict only the licensee's authority under the specialty certificate.

(Amended by Stats. 2024, Ch. 497, Sec. 44. (SB 1526) Effective January 1, 2025. Repealed as of January 1, 2027, pursuant to Section 3686.)

3653. (a) Naturopathic childbirth attendance does not include the use or performance of any of the following:

- (1) Forceps delivery.
- (2) General or spinal anesthesia.
- (3) Cesarean section delivery.
- (4) Episiotomies, except to the extent that they meet the same supervision requirements set forth in Section 2746.52.

(b) Naturopathic childbirth attendance does not mean the management of complications in pregnancy, labor, delivery, or the neonatal period. All complications shall be referred to an obstetrician or other licensed physician and surgeon as appropriate.

(Added by Stats. 2003, Ch. 485, Sec. 5. Effective January 1, 2004. Repealed as of January 1, 2027, pursuant to Section 3686.)

3654. In addition to Section 3640, a naturopathic doctor who holds a specialty certificate in naturopathic childbirth attendance may administer, order, or perform any of the following:

- (a) Postpartum antihemorrhagic drugs.
- (b) Prophylactic ophthalmic antibiotics.
- (c) Vitamin K.
- (d) RhoGAM.
- (e) Local anesthetic medications.
- (f) Intravenous fluids limited to lactated ringers, 5 percent dextrose with lactated ringers, and heparin and 0.9 percent sodium chloride for use in intravenous locks.
- (g) Epinephrine for use in maternal anaphylaxis pending emergency transport.
- (h) Measles, mumps, and rubella (MMR) vaccine to nonimmune, nonpregnant women.
- (i) HBIG and GBV for neonates born to hepatitis B mothers, per current Centers for Disease Control guidelines.
- (j) Antibiotics for intrapartum prophylaxis of Group B Betahemolytic Streptococcus (GBBS), per current Centers For Disease Control guidelines.
- (k) Equipment incidental to the practice of naturopathic childbirth, specifically, dopplers, syringes, needles, phlebotomy equipment, suture, urinary catheters, intravenous equipment, amnihooks, airway suction devices, neonatal and adult resuscitation equipment, glucometer, and centrifuge.
- (l) Equipment incidental to maternal care, specifically, compression stockings, maternity belts, breast pumps, diaphragms, and cervical caps.

(Added by Stats. 2003, Ch. 485, Sec. 5. Effective January 1, 2004. Repealed as of January 1, 2027, pursuant to Section 3686.)

3655. (a) A licensee holding a specialty certificate in naturopathic childbirth attendance shall disclose to each client, in writing, the following:

- (1) The qualifications and credentials of the naturopathic doctor.
- (2) A copy of the written plan for consultation, emergency transfer, and transport.
- (3) A description of the procedures, benefits, and risks of birth in the home or outside of a hospital setting.
- (4) The status of liability coverage of the licensee for the practice of naturopathic childbirth attendance.

(b) The form must be signed by the client, filed in the client's chart, and a copy given to the client.

(Added by Stats. 2003, Ch. 485, Sec. 5. Effective January 1, 2004. Repealed as of January 1, 2027, pursuant to Section 3686.)