

MSF CV TEMPLATE: MIDWIFE

Last Name (s) (maiden if applicable) _____
First Name _____
Email Address _____
Home Phone _____
Mobile _____
Home Address _____
Current Address (if different from home address) _____

Skype Name _____

PERSONAL DETAILS

Date of Birth _____

Place of birth _____

All current nationalities:

Gender: Male Female Custom

Mother tongue:

English French Spanish Arabic

Other: _____

Other Language (s): you can speak & understand fluently (written and spoken) in a working environment:

LEVEL

English _____

French _____

Spanish _____

Arabic _____

Other: _____

Professional Licences/Registration

Place of Midwife License _____

Number _____ Date of Expiry _____

Place of Midwife License _____

Number _____ Date of Expiry _____

EDUCATION

Midwifery Education

Place (State University/ City/ Country) _____

Duration of Studies
(years/months): _____

From _____ To _____

Type of Diploma or Certificate
obtained _____

Date obtained _____

Professional Number _____

Other Education

University Degree _____

Place (State University/ City/ Country) _____

From _____ to _____

Master's Degree _____

Place (State University/ City/ Country) _____

From _____ to _____

Speciality Diploma _____

Place (State University/ City/ Country) _____

From _____ to _____

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PROFESSIONAL EXPERIENCE

Employment History Summary Including CURRENT employment

Please complete with the most recent post first and give a brief description of your activities

DATE (start-end)	Position	Type of Activity	City/Country

OTHER PROFESSIONAL EXPERIENCE (MEDICAL OR NON-MEDICAL)

DATE (start-end)	Position	Type of Activity	City/Country

OTHER MEDICAL TRAINING OR RELEVANT COURSES (ALSO, Neonatal Resuscitation)

DATE (start-end)	Position	Type of Activity	City/Country

PLEASE PROVIDE THREE REFERENCES

	NAME	TITLE	ADDRESS	CONTACT DETAILS
1				
2				
3				

This checklist below is intended for midwives who may be expected to have responsibilities in obstetrics/reproductive health. It should be filled according to your current practice level. **Part 1** covers basic skills and key competencies while **Part 2** includes emergency obstetrical procedures. This information will be useful for better matching of staff to postings, and to identify specific training/coaching needs. It may also be used as a tool for follow up of personal development of our expats during their MSF career.

Instructions:

The checklist covers levels of competency, including theoretical knowledge, practical clinical experience (under supervision), competence to perform independently, and confidence to train others. Please fill the columns according to your current level. **Mark "1" for yes or "0" for no.**

In the last column, we ask for the date (year) you last performed that function. Use the comments column to give detail if needed.

PART 1: BASIC MIDWIFERY / OBSTETRIC SKILLS to be completed by midwives an active role in obstetric care	Theoretical knowledge only	Practical clinical experience	Competent to perform independently	Confident to train to others in the field	Date last performed (year)	Comments
ANTENATAL CONSULTATION						
Antenatal Skills: pregnancy confirmation; estimate gestational age and due date; antenatal care (history, focused physical examination, ordering and interpreting results of basic screening laboratory tests, and counselling); educate women about dangers signs in pregnancy and support them with creating a birth plan						
Identify co-existing disease; commence first line treatment according to protocol for antenatal complications						

	Theoretical knowledge only	Practical clinical experience	Competent to perform independently	Confident to train to others in the field	Date last performed (year)	Comments
Basic ultrasound skills, e.g. foetal position, placental location, foetal viability						
Malaria and infectious disease screening in pregnancy						
LABOUR, DELIVERY, AND IMMEDIATE POSTPARTUM CARE						
Labour Management: identify labour onset; identify coexisting disease and commence 1st line treatment; monitor maternal and foetal well-being during labour; manage a normal delivery; provide active 3rd stage management; inspect placenta and membranes for intactness						
Follow labour progress using a partograph (WHO or other)						
Stimulate labour using physiologic measures, e.g., ambulation/position changes, shower, massage, etc.						
State here the number of deliveries you have conducted independently (not supervised) in the past 2 years. Give best estimate.						
Maternal basic life support (CPR)						
Identify complications in labour and birth, e.g. abnormal presentation, prolapsed cord, haemorrhage, failure to progress						
Initial management in case of complications, e.g. IV access, bladder catheterisation						
Management of mild/moderate postpartum haemorrhage, fluid resuscitation (large bore IVs x 2), administration of uterotonic agents, fundal massage, bimanual compression						

	Theoretical knowledge only	Practical clinical experience	Competent to perform independently	Confident to train to others in the field	Date last performed (year)	Comments
Stabilise mother and newborn for transfer to a higher level facility						
Perform episiotomy						
De-infibulation and post-delivery repair (NOT re-infibulation!) in presence of female genital cutting						
Repair of episiotomy or 1st /2nd degree tear						
Obstetric fistula care: secondary prevention of fistula (bladder catheter routinely after obstructed labour); conservative management of small, fresh fistula (catheter as long as fistula seems to become smaller)						
NEONATAL SKILLS						
Assess newborn's vital signs; identify need for and manage resuscitation						
Perform initial (basic) physical exam of the newborn						
Provide routine newborn care, including administration of prophylactic eye ointment, Vitamin K, and birth (first) doses of vaccines						
Initiate and establish breastfeeding						
Identify complications, e.g. infections, and provide first line treatment						
Instruct in and support use of kangaroo mother care						
POSTNATAL CONSULTATION						
Postnatal skills: Postnatal care (history, physical examination of mother and infant, and counselling); identify postnatal complications in mother and baby; educate women about danger signs for self and child						
Provide first line treatment for postnatal maternal complications, e.g. infection, postpartum depression, etc.						

OTHER SEXUAL AND REPRODUCTIVE HEALTH CARE

	Theoretical knowledge only	Practical clinical experience	Competent to perform independently	Confident to train to others in the field	Date last performed (year)	Comments
Prevention of mother-to-child transmission of HIV (PMTCT) -- provide care during pregnancy, childbirth, and the postnatal period						
Perform a vaginal speculum exam						
Manage sexually transmitted infection using syndromic approach						
Contraceptive counselling and prescription						
Insertion of contraceptive implant						
Insertion of intra-uterine contraceptive device						
Perform termination of pregnancy on request, including pre- and post-procedure counselling						
Provide care for sexual assault (rape) survivors, including history, physical examination, preventive treatment, and counselling						
Perform visual inspection of cervix for cervical cancer screening						
Provide treatment of early stage / non-invasive cervical cancer (cryotherapy)						

MANAGEMENT AND SUPERVISION

Supervise appropriate measures for infection prevention and control practices, including use of universal precautions, basic hygiene (e.g. cleaning of patient care areas), and sterilisation of instruments						
Collect and analyse data relating to sexual and reproductive health services; report-writing						
Set up or evaluate a clinic / obstetric service						
Teach on seminars / formal courses						
Human resources management: hire staff, coach them, and evaluate their performance						

PART 2: LIFE-SAVING OBSTETRICAL SKILLS**1ST TRIMESTER PREGNANCY COMPLICATIONS**

	Theoretical knowledge only	Practical clinical experience	Competent to perform independently	Confident to train to others in the field	Date last performed (year)	Comments
Post-abortion care, medical method: Misoprostol / Mifepristone						
Uterine evacuation using Manual Vacuum Aspiration (MVA)						

INTRAPARTUM COMPLICATIONS

Management of pre-term labour						
Induction/Augmentation of labour, including Oxytocin/prostaglandin regimen						
Management of (pre-)eclampsia, including MgSO4 regimen						
Advanced ultrasound skills, e.g. for assessment of gynaecologic / obstetric complications						
Internal version manoeuvre (e.g. transverse lie of 2nd twin)						
Breech delivery						
Twin delivery (also triplets, etc)						
Shoulder dystocia						
Vacuum extraction (ventouse)						
Forceps delivery						
Symphiotomy						
Craniotomy (destructive delivery)						
Monitoring patient under anaesthesia						
Anaesthesia management - local - paracervical, pudendal - other (specify)						
First Assist in Caesarean Section						

