

The Honorable Joseline Pena-Melnyk
Chair, House Health and Government Operations Committee
House Office Building, Room 241
6 Bladen Street
Annapolis, MD 21401

February 22, 2023

TESTIMONY IN SUPPORT: House Bill 351 – Health Occupations – Licensed Direct-Entry Midwives – Previous Cesarean Section

Dear Chair Pena-Melnyk and Members of the Committee:

My name is Jocelyn Stoyer. I am a mama to three littles, a nurse and lactation consultant. I work at Howard County General Hospital and was able to successfully have 2 VBACs there. It took me a while to find providers that would accept me wanting to have a VBAC. My first two sons are 21 months apart and I had a c section with my first for a nuchal cord (umbilical cord wrapped around) wrapped around his neck and body 4 times, not allowing him to descend into the birth canal. What this means is my chances to have a successful VBAC were really good. I started seeing the midwives at a local OB practice and they made me feel empowered and like I was going to do this. Toward the end of my pregnancy they referred me back to the OBs because they started a new protocol that women with my body type needed to have more frequent NSTs because the practice recently had a late term loss. The OBs were more conservative and I was talked to at every appointment about the risks and chance I would be taking to have a VBAC this time around. There were 2 supportive doctors at the practice and I started just seeing them, even though my chances of actually delivering with them there at the hospital were only 20% seeing as the practice had 10 doctors. At my 40 week appointment my favorite doctor checked my cervix and I was dilated to 2 cm and it was favorable for delivery. The next day contractions started but stopped soon after. At 41 weeks my favorite doctor asked if I wanted to try and get labor started with an induction; try the foley bulb with a little oxytocin. So we did that and it was successful. I then went on to have a second VBAC with my daughter 20 months ago. This time I went into labor all on my own and she came very quickly.

All of this to say it was really hard for me to find support for a VBAC when delivering at the hospital. Now I know more about midwives and home births and things that I honestly didn't know much about before. I had to advocate really really hard to get a VBAC, when in reality it's safer for mom and baby than a repeat c section; major abdominal surgery. I know there are chances of uterine rupture and bleeding with VBAC. I also know that there are even more risks with c sections.

Just wanted to bring to light that I wish more moms had the resources to be supported and even given the option to have a VBAC.

Sincerely,

Jocelyn Stoyer