

Hospital Obstetrical Services CoP Readiness Consulting

Last reviewed October 2026 · <https://www.integralhs.com/hospital-obstetrical-services-cop-readiness>

What to have ready

- The current text of 42 CFR 482.59 [<https://www.law.cornell.edu/cfr/text/42/482.59>] and CMS memo QSO-26-07 [<https://www.cms.gov/files/document/qso-26-07-hospitals-cahs-ob-cop-original-release-2026-03-27.pdf>].
- A description of your obstetrical services and how they fit the needs and resources of your facility, as paragraph (b) frames it.
- Your organization chart showing how obstetrical services connect to other hospital departments, per paragraph (a).
- The list of who supervises labor and delivery rooms or suites, with their credentials, per paragraph (a)(1).
- Obstetrical privileges for each practitioner providing obstetrical care, and how they follow each practitioner's competencies under 482.22(c), per paragraph (a)(2).
- An inventory showing a call system, a cardiac monitor and a fetal doppler or monitor, kept and readily available, per paragraph (b)(1).
- Your protocols for obstetrical emergencies, complications and immediate care after delivery, plus the equipment, supplies and medication they call for, per paragraph (b)(2).
- The guideline sources your clinicians used for those protocols, since paragraph (b)(2) calls for protocols consistent with nationally recognized and evidence-based guidelines.
- Recent QAPI findings that touch obstetrical care, since paragraphs (b)(2) and (c)(1) both draw on them.
- A draft staff training policy, the governing body's record of which staff must complete initial and biennial training, and where completion is documented in personnel records, per paragraphs (c)(3) and (c)(4).
- Evidence of staff knowledge on your training topics, per paragraph (c)(5).

When these are gathered, or when you know which are missing, book the free introductory call and we will scope the work from there.