

OVER 24 WEEKS IUD/Stillbirth CHECKLIST

PATIENT IDENTIFYING LABEL

Please tick initial date and time EVERY Yes, No or N/A

Prior to delivery (IUD):

	<u>YES</u>	<u>NO</u>	<u>N/A</u>
Confirmed no Fetal Heart by USS by Obstetrician (spontaneous IUD)			
Second USS performed?			
Medical TOP for abnormality (if yes complete forms below this is a legal requirement)			
Consent Form medical TOP (Doctors to complete)			
Prescription on drug chart (Doctors to complete)			
Fetocide advised (Gestation over 21+6)			
-Accepted?			
Referral to Bristol			
-Confirmed fetocide successful (USS)			
Verbal and written information on Induction of labour (leaflet on BOB 'Induction of labour when the baby has died in the womb')			
Discussion and documentation of appropriateness of post mortem by Consultant			

Patient name :
NHS Number :

For all Intrapartum stillbirths ensure notes photocopied as soon as possible after delivery

On Admission

Commence Yellow Labour notes then use Mauve Bereavement Post natal notes, use the NDDH checklist not the generic list in postnatal notes, file in medical notes on discharge

<u>Information for parents</u>			
SANDS leaflets (all patients)			
NDDH leaflet Information following a Stillbirth (on BOB or in Pack)			
Appropriate Contact numbers given (e.g. CDS1, Petter, screening Co-ordinator)			
Discuss and give SANDS leaflet on Post Mortem (Over 12 weeks) advise parents that they do not have to make a decision immediately			
Explain option of taking baby home if appropriate			
Discuss immediate care of baby (inc appearance, parents wishes, time alone.)			

Tests and Investigations

<u>Maternal Investigations</u>			
Bloods taken (See Investigations list)			
FBC and Group and Save (all patients, on admission if possible)			
Swabs taken if required (particularly if infection suspected)			
Placental swabs take maternal and fetal side (for unexplained losses)			
Kleihauer taken (post delivery all unexplained losses)			
<u>Baby Investigations</u>			
Baby weighed and labelled			
Cord and Placental sample taken- -If for PM in Formalin in white bucket to go with baby -If not for PM in Formalin to Histology in white bucket with request form			
Genetic Testing required? If YES -Skin sample in biopsy pot from Bristol in freezer			

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Transfer to Mortuary

Second discussion about post mortem			
-Baby, labelled with mothers details in appropriate size casket lined with an inco together with personal items eg teddy/blanket			
-Placenta (if for PM) labelled with mothers details. Send with baby AND paperwork as per yellow folder (consent and perinatal request form)			
Inform Porters to collect baby			
Placenta (if NOT for PM), labelled send to pathology with histology form			

Keepsakes for Parents

Memory Box (large) given			
Please complete slip to replace box and send to bereavement Office or leave message on answerphone.			
Photographs of baby (if declined take and place in sealed envelope in medical notes)			
Hand and Footprints taken if possible			
Cot card completed			
Lock of hair if possible			

Notes and forms; (Follow the Yellow folder flow charts)

Admission, Delivery and Postnatal notes completed			
Birth register completed on CDS1 if applicable			
Post Mortem consent form signed (to be done by Elisabeth Seymour or consent taking trained staff)			
Perinatal Post Mortem request form (Doctor or Midwife to complete) Both forms to go with baby to mortuary			

Patient name :
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Medical Certificate of Stillbirth (see yellow folder signed by Midwife or Doctor) All sections completed fully given to parents			
Parents advised to contact Bereavement Support Office to discuss Cremation/Burial			
Discuss can have private funeral arrangement			
Discuss and offer pastoral services/naming/blessing and inform Chaplain			
Inform bereavement Officer (Elisabeth Seymour)			
Offer chance to take baby home (if yes sign release form)			

If for PM see flowchart on CDS1 for paperwork. Will need Perinatal PM request form and PM Consent form completed by trained consent taker

Arrange

Cancel Antenatal appointments and USS appointments using the form on appendix E for Antenatal reception			
Arrange 6/52 Postnatal appointment with named Consultant by emailing or telephone the secretary of the named Consultant			
Complete Bounty suppression form			
Duty of Candour, give PMRT Information for Parents leaflet and advise that an investigation will take place			
On Computer Admit on Trakcare (this will disappear when registered as a stillbirth) Baby must have an NHS and Trakcare number			
DATIX completed (for all fetal losses)			

On Discharge

Anti D given			
Offer discussion with Obstetrician and document			
Discuss Physiological changes (eg, vaginal loss, lactation)			

Patient name : NHS Number :

Offer CMW visit or phone call if appropriate			
Offer GP follow up			
Discuss counselling available through GP			
Inform CMW verbally and give copies of discharge summary			
Inform GP verbally and give copies of discharge summary			
Add SANDS teardrop sticker to Medical notes			
Offer visit to Mortuary/CDS1 if parents wish to see baby again, ensure parents have bereavement Support Office number			
Ensure parents have Bereavement Office, CMW and CDS1 contact numbers together with SANDS leaflets for additional support available			
Ensure parents aware of need to register the baby using the Stillbirth certificate			
MBRRACE completed on line			

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