

PROCEDURE FOR: Death (Stillborn and Neonatal): Process for Completion of Documentation

PURPOSE: To provide consistent guidelines for completion of paperwork process required after a stillborn delivery/neonatal death.

- POLICY:
1. Accurate and complete documentation on forms is required by hospital/ state policy when a baby dies.
 2. Responsibility for paperwork involved and preparation of infant for family viewing and/or transport to morgue is dependent on whether or not the infant is admitted to the NICU.
 - a. If the infant is admitted to the NICU, facilitation of paperwork and post-mortem care is the responsibility of the NICU staff.
 - b. If the infant is not admitted to the NICU, paperwork and post-mortem care will be processed by L&D and OB-GYN staff.
 3. Nursing facilitates the process of paperwork involved.
 4. Forms that require physician documentation will be completed by MD.

ASSOCIATED

STANDARDS: OB-GYN/L&D Unit Practice Manual:
Procedure for: Second Trimester Induction/Termination of Pregnancy: Scheduling/Admission
Protocol for: Grieving: Care of the Patient Who Has Suffered an Infant Loss

Hospital Administrative Manual:
Administrative Procedure #07-010, "Death of a Patient"

DOCUMENTATION: See description of appropriate documentation on each specific form. Completion of forms is documented on Nursing Worksheet for specific required paperwork when a baby dies - Attachment A.

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PROCEDURE:

ACTION

POINTS OF EMPHASIS

I. GENERAL INFORMATION:

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| <p>1. Stamp Nursing Worksheet For Paperwork Required when a baby dies.</p> <p>2. Initiate Nursing Worksheet by filling out demographic information at top of the first page.</p> <p>3. For Second Trimester Terminations:</p> <p>a. Initiate OB-GYN/L&D Admission Database.</p> <p>b. A focus note will be written documenting patient's response to pre-procedural call.</p> <p>c. Complete paperwork for appropriate gestational age and status of fetus at time of delivery.</p> <p>4. For Stillborn Deliveries in L&D:</p> <p>a. Complete paperwork for appropriate gestational age at time of delivery.</p> <p>5. For Neonatal Deaths:</p> <p>a. Complete appropriate paperwork.</p> | <p>1. All patients with anticipatory or actual losses should have the worksheet.</p> <p>Patients with a diagnosis of intrauterine fetal demise or second trimester termination should have worksheet stamped and on clipboard at time of admission.</p> <p>3. Data Base information should be obtained prior to patient's admission, whenever possible, at time of pre-procedural call, or when patient is admitted to the unit.</p> <p>c. See explanation of appropriate paperwork listed below.</p> <p>a. See explanation of appropriate paperwork listed below.</p> <p>a. Consult with NICU staff to determine what paperwork has been completed.</p> <p>Body Release and birth certificate forms are generally completed by OB-GYN staff prior to discharge of mother to home.</p> |
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Complete the following paperwork:

II. LESS THAN 20 WEEKS: STILLBORN (REQUIRED):

1. Initiate and complete OB-GYN/L&D Database.
2. Complete Helping Endure Infant Loss (H.E.A.L) or Helping Other Parents Endure (H.O.P.E) referral as appropriate.
 - a. H.E.A.L. referrals are placed in H.E.A.L. mailbox in NICU staff hallway.
 - a. A H.E.A.L. referral is made for an unexpected loss.
 - b. H.O.P.E. referrals are placed in folder in the Perinatal Loss Checklist Binder located on OB/GYN Unit chart rack after form has been faxed to Genetics.
 - b. A H.O.P.E. referral is made for couples who have elected to terminate their pregnancy.
3. Certificate of Birth/Fetal Death Worksheet may be completed by RN, patient or family member. This form is used as a data collection tool. It is destroyed after patient discharge.
3. Information obtained can also be used on Fetal Death Certificate and Medical Examiners form when necessary.
4. Surgical/Cytology Requisition Form for Placenta: Can be completed by RN. Accompanies specimen to Pathology.
4. "Baby of" needs to appear above patient identification stamp. Additional report requests must be addressed on the form (home, hospital, genetics, private MD).
5. Surgical/Cytology Requisition Form for Fetus: Completed by RN. Accompanies fetus to Pathology.
5. "Baby of" needs to appear above patient identification stamp. Additional report requests must be addressed on the form (home, hospital, genetics, private MD).
6. Mementos: See Nursing Worksheet for Required Paperwork When a Baby Dies for list of mementos to be saved/given to parent(s).
6. Place mementos in a cloth memory envelope, label and offer to parent(s). If parent(s) are unable or unwilling to accept them at discharge, transfer mementos to manila envelope and hold on file indefinitely.

If Parents Desire a Funeral (Optional):

- ** Funeral home is optional under 20 weeks and stillborn.

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| <p>7. Body Release Form: Parents with assistance from RN will complete the form with name of funeral home and parental signature. RN will witness the form. Form accompanies fetus/infant to Pathology.</p> | <p>7. DO NOT SEND FORM TO PATHOLOGY WITHOUT A FUNERAL HOME NAMED. "Baby of" needs to appear above patient identification stamp.</p> |
| <p>8. Fetal Death Certificate (blue): Using information from the Fetal Death Worksheet and the delivery data. Complete appropriate sections. Certificate accompanies body to the morgue.</p> | <p>8. Fetal Death Certificate is required by State law for the funeral. Certain information requires MD completion.</p> <p>The RN will transcribe information from birth certificate worksheet on to fetal death certificate.</p> <p>Please enter "For Burial Purposes Only" beneath the form title Certificate of Fetal Death.</p> |
| <p>9. Log for Expired Patients Form: Completed by the RN. Form is given to the nursing supervisor at the time of transportation of infant body to the morgue.</p> | <p>9. Name of person transporting body with date and time of transport is required on form.</p> |
| <p>10. Organ/Tissue Record for Potential/Actual Donation.</p> | <p>10. 1-800 number on Log for Expired Patients Form. Follow Information Needed Form to answer questions. If criteria not met, check "no" box and sign form. Form goes to Nursing Office.</p> |
| <p>11. Paternity Papers if parents are not married.</p> | <p>11. Staple original to Fetal Death Certificate.</p> |
| <p><u>If Parents Do Not Want Autopsy:</u></p> | |
| <p>12. An autopsy is performed automatically on all fetuses less than 20 weeks and stillborn. A separate autopsy form is not needed in this case.</p> | <p>12. M.D./Genetic Counselors requesting additional information/testing to be done at the time of autopsy must request it on form prior to transporting of fetus to pathology. If patient/family do not want autopsy done, RN will write "external examination only" on surgical/ cytology requisition form.</p> |
| <p><u>If Parents Desire Genetic Studies (Optional):</u></p> | |
| <p>13. Surgical/Cytology Requisition Form: RN can complete. Form accompanies skin and blood samples to Cytogenetics Lab.</p> | <p>13. Fetal skin sample is placed in sterile water in plastic container and refrigerated. Fetal cardiac blood is placed in a green top tube.</p> |

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III. GREATER THAN 20 WEEKS: STILLBORN (REQUIRED):

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| 1. Data Base | |
| 2. H.E.A.L. <u>OR</u> H.O.P.E. Referral | 2. See #2 of Less than 20 Weeks. |
| 3. Certificate of Birth/Fetal Death Worksheet | 3. See #3 of Less than 20 Weeks. |
| 4. Surgical/Cytology Requisition Form for Placenta | 4. See #4 of Less than 20 Weeks. |
| 5. Body Release Form | 5. See #7 of Less than 20 Weeks. |
| 6. Medical Examiners Form (ME) to be completed by RN and MD. Form accompanies infant body to morgue. | 6. Medical Examiner's office must be called by RN, MD or supervisor to report death (phone # on front of form). ME office representative will then assign a case # and determine case acceptance or refusal. RN, MD or supervisor will then document on ME form "NO CASE" if case refused. |

* Medical Examiners form does not have to be completed if fetus is <500 grams.

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| 7. Fetal Death Certificate (blue) | 7. See #8 of Less than 20 Weeks. MDs responsible for completing the blue area. |
| 8. Paternity Papers | 8. See #11 of Less than 20 Weeks. |
| 9. Log for Expired Patients | 9. See #9 of Less than 20 Weeks. |
| 10. Mementos | 10. See #6 of Less than 20 Weeks. |
| 11. Organ/Tissue Record for Potential/ Actual Donation. | 11. See #10 of Less than 20 Weeks |

If Parents Desire Autopsy (Optional):

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| 12. Post Mortem Permission Form | 12. M.D. will complete form. Form will accompany fetus to pathology. |
| 13. Clinical Context Data Form | 13. M.D. will complete form. Form will accompany fetus to pathology. |

If Parents Desire Genetic Studies (Optional):

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| 14. Cytogenetics test request Form | 14. See #13 of Less than 20 Weeks. |
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IV. ANY LIVEBORN INFANT REGARDLESS OF GESTATIONAL AGE:

1. Data Base

2. H.E.A.L. OR H.O.P.E. Referral

3. Certificate of Birth/Fetal Death Worksheet

4. Surgical/Cytology Requisition Form

5. Body Release Form

6. Medical Examiners Form

7. Certificate of Live Birth: This form is in patient's chart and has been signed by delivering physician. Do not write on this form. Place both the worksheet and the certificate in plastic pocket found in front of patient's chart.

8. Complete a social security form for any live birth.

9. Certificate of Death (pink): Fill out form as per instructions found on form.

10. Log for Expired Patients

11. Organ/Tissue Record for Potential/Actual Donations

12. Paternity Papers if Parents not married

13. Mementos

14. Social Security Form

2. See #2 of Less than 20 Weeks.

3. Transcription of information found on worksheet to signed birth certificate is done by Medical Records personnel. When infant live-born, the worksheet is not discarded. Worksheet is handed in to Medical Records with birth certificate.

4. See #4 of Less than 20 Weeks.

5. See #7 of Less than 20 Weeks.

6. See #6 of Greater than 20 Weeks and Stillborn.

9. Be sure to include how long infant lived in days/hours/minutes - see section 5 a & b.

10. See #9 of Less than 20 Weeks and Stillborn.

11. See #10 of less than 20 Weeks and Stillborn.

12. Papers must be notarized.

13. See #6 of Less than 20 Weeks and Stillborn.

14. Required for tax purposes. Hand in with birth certificate.

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If Parents Desire Autopsy (Optional):

15. Post Mortem Permission Form

15. See #10 of Greater than 20 Weeks
and Stillborn.

16. Clinical Context Data Form

16. See #11 of Greater than 20 Weeks
and Stillborn.

If Parents Desire Genetic Studies (Optional):

17. Cytogenetics test request

17. See #13 of Less than 20 Weeks and
Stillborn.

APPROVAL: Nursing Standards Committee

CREDENTIALS: RN, MD

EFFECTIVE DATE: 11/93, 9/94

REVISION DATES: 3/97, 9/98, 9/99, 1/00, 4/00, 6/00

REVIEWED DATES: 9/08