



L&D.7.1.1 Cardio-tocography machines (at least one capable of simultaneous recording of twin fetal hearts).

L&D.7.1.2 Automated blood pressure monitoring machines.

L&D.7.1.3 Pulse oximetry.

L&D.7.1.4 Appropriate delivery bed.

L&D.7.1.5 Intravenous infusion pumps.

L&D.7.1.6 Adequate light source appropriate for surgical care.

L&D.7.1.7 Specific obstetric instruments such as amnihooks, vacuum extractor and obstetric forceps.

L&D.7.1.8 Infant resuscitation equipment and supplies.

L&D.7.1.9 Emergency obstetric medications (e.g., oxytocics).

Standard Intent:

Adequate resources as equipment, medication and tools are adequately available in obstetric department to meet the patient care needs and provision of department services including; Cardio-tocography machines (at least one capable of simultaneous recording of twin fetal hearts), automated blood pressure monitoring machines, pulse oximetry, appropriate delivery bed, intravenous infusion pumps, adequate light source appropriate for surgical care, specific obstetric instruments such as amnihooks, vacuum extractor and obstetric forceps, infant resuscitation equipment and supplies and emergency obstetric medications (e.g., oxytocics and other medications used for controlling postpartum hemorrhage).

L&D.8 Newborns receive the proper care by qualified nurses.

L&D.8.1 There is a qualified and competent nurse to receive the newborn during delivery.

L&D.8.2 The attending nurse is qualified to perform the following for each newborn:

L&D.8.2.1 Suction.

L&D.8.2.2 Placing an identity band with the medical record number and other identifier(s) according to the hospital policy.

L&D.8.2.3 Finding and documenting the APGAR score.

L&D.8.2.4 Obtaining the footprint of the newborn and the thumbprint of the mother.

Standard Intent:

Qualified and competent nurses must be adequately available in obstetric department in general and in delivery room in specific to carry the newborn care during delivery as immediate suction, complete identification of the newborn by placing identity band/s with medical record number and other identifiers according to hospital policy, finding and documenting APGAR score, obtaining the footprint of the newborn and the thumbprint of the mother. Neonatal identification with reference to the mother should be done in the room where the delivery took place whether a delivery room or