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operating room. The neonate should not leave the place of delivery without the proper identification.

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**L&D.9 The medical records of the obstetrics department are properly completed.**

L&D.9.1 The following information must be available in patients' records before discharge from the delivery room:

L&D.9.1.1 Completed assessment and reassessment.

L&D.9.1.2 Completed partogram.

L&D.9.1.3 Secured cardio-tocography.

L&D.9.1.4 Initial neonatal assessment.

L&D.9.1.5 Delivery summary including method of delivery, date and time of delivery, name and designation of the healthcare professional who conducted the delivery and any assistants, type of anesthesia or sedation used during delivery, neonatal outcome, status of placenta and membranes, any postpartum instructions, and postpartum observations and discharge criteria.

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**Standard Intent:**

Care of patients in the obstetric department should be fully documented and medical records should be completed before patient discharge from the delivery room. The Medical records should contain the followings; completed assessment and reassessment, completed partogram, secured cardiotocography, initial neonatal assessment, delivery summary including method of delivery, date and time of delivery, name and designation of the healthcare professional who conducted the delivery and any assistants, type of anesthesia or sedation used during delivery, neonatal outcome, status of placenta and membranes, any postpartum instructions, and postpartum observations and evidence of the patient meeting the discharge from labor room criteria.

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## Hemodialysis Standard Intents

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**HM.1 Qualified nephrologist is responsible for managing the clinical services in the hemodialysis unit.**

HM.1.1 Clinical services in the hemodialysis unit are led by a qualified nephrologist with experience in managing end stage renal disease (ESRD) patients.

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**Standard Intent:**

The head of the hemodialysis unit should be a qualified nephrologist with experience in managing end-stage renal disease (ESRD) patients.

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**HM.2 Qualified nurse is responsible for supervising nursing services in the hemodialysis unit.**

HM.2.1 The nurse in charge of the hemodialysis unit is a qualified registered nurse with training, education or experience in hemodialysis.

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HM.2.2 Nursing staff members are registered nurses qualified to care for ESRD patients by education, training or experience.

**Standard Intent:**

The hemodialysis head nurse must be qualified with education, training, experience, and the staff members are registered nurses qualified to care for ESRD patients by education, training or experience.

**HM.3 Each patient's hemodialysis care is planned and documented in the patient's medical record.**

- HM.3.1 Hemodialysis procedures are ordered by a qualified nephrologist.
- HM.3.2 Comprehensive assessment and reassessment is performed for each patient in the hemodialysis unit.
- HM.3.3 The need for dialysis and choice of modality are based on sound clinical principles and a thorough clinical evaluation of the clinical condition and any associated co-morbidities.
- HM.3.4 Informed consent is obtained for all dialysis patients after providing adequate information about the different modalities and the modality that is most appropriate for the patient's needs. The consent is updated regularly (e.g., yearly) and when the risk level is changing.
- HM.3.5 Multi-disciplinary plan of care is developed for each patient in coordination with other relevant health professionals (e.g., physician, nurse, dietitian, pharmacist, and social worker).
- HM.3.6 There is an appropriate multi-disciplinary patient education plan.
- HM.3.7 Patients are properly monitored during and after dialysis.
- HM.3.8 Plan of care is documented in the patient's medical record.
- HM.3.9 Emergency medical care is available when needed.
- HM.3.10 Clinical staff who participate in caring for patients on dialysis are certified in advanced life support as appropriate to the different age groups of patients, or at least one certified individual is assigned on every shift.

**Standard Intent:**

The hemodialysis care plan must be documented in the patient medical record to include all elements in sub-standards HM.3.1- HM.3.10.

**HM.4 The hemodialysis unit has admission and discharge criteria.**

- HM.4.1 The hemodialysis unit has admission and discharge criteria consistent with evidence-based practice.
- HM.4.2 The criteria are collaboratively developed by nephrologists, nursing staff and other relevant departments.

**Standard Intent:**