

Standard Operating Procedure (SOP)

SOP Title	Pregnancy loss (less than 16/40) – Disposal of Products of Conception (POC)		
SOP Number	(048)		
Care Group	Women and Children's		
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1	15.3.19	Alex Keene	Live	Full review 15.3.24
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SOP Objectives	<ul style="list-style-type: none"> To provide a clear pathway for the sensitive disposal of Products of Conception (POC). To ensure that medical and nursing staff are appropriately trained in dealing with pregnancy loss and consent for sensitive disposal.
Scope	<ul style="list-style-type: none"> To ensure the correct process for the sensitive disposal of POC is adhered to and to comply with patient's wishes and relevant legislation. SaTH has a responsibility to ensure that appropriate counselling is provided for patients and partners, this will ensure that their choice of disposal method is an informed choice and meets with local agreed procedures. To ensure correct consent process is adhered to re: incineration or parents own arrangements.
Performance Measures	Audit, Datix

Number	Brief	Responsibility
1.	The primary requirements for the handling and sensitive disposal of Products of Conception (POC) is to comply with parents' wishes and legal requirements.	Nursing and Medical teams Pathology
2.	The term Products of Conception (POC) refers only to any placental tissue or any other tissue that is not identified as fetal tissue (NVF) at USS or when sent to histology for analysis.	
3.	Where a fetus has not been identified as below <ul style="list-style-type: none"> No previous scan Fetus not identified on scan Patient presents with heavy bleeding Following surgical or medical intervention Tissue will be sent to histology for analysis, if fetal remains/tissue are identified this will be handled as NVF (See NVF SOP). If no fetal remains/tissue are identified – placental tissue only, this will be handled and be disposed of as POC.	Medical and Nursing teams
4.	Parents must be informed of this in an appropriate and sensitive manner and be assured if fetal tissue/remains (NVF) are identified this will not be incinerated as POC.	Medical and Nursing teams
5.	SaTH is responsible for the sensitive disposal of POC by incineration. This service will be undertaken by an offsite external company.	
6.	Parents may decide to make their own arrangements within HTA guidance, and they have the legal right to take POC home. To bury any tissue at home legal requirements, need to be met. (See SOP)	Parents
7.	Where a fetus has not been identified and uncertainty of NVF or POC present, parents need to be counselled re tissue that is going to be sent to histology to confirm if any fetal tissue (NVF) present, an integrated disposal form MUST be signed and completed by patient and doctor/nurse trained in obtaining sensitive consent.	Medical and Nursing teams
8.	The gathering of remembrance must be discussed with the parent and integrated disposal form completed. The parent must be asked if they want to be informed if fetal tissue is identified and cremated as NVF, this must be documented on the integrated disposal form. <ul style="list-style-type: none"> Patients who wish to be informed if fetal tissue (NVF) is identified will be contacted to inform them that the fetal tissue has been sent for cremation. 	Medical and Nursing teams
9.	The integrated disposal form and histology form is sent with tissue to the mortuary. The mortuary will send tissue to histology for analysis. NVF fetal tissue will be returned to the mortuary for sensitive disposal as per NVF – cremation/patients own arrangements. <ul style="list-style-type: none"> POC only will be kept in the lab in a designated container for POC and sent off site for sensitive incineration. POC will not be incinerated with clinical waste. The mortuary will inform EPAS by email if NVF identified and tissue sent to the crematorium, letter to be sent to patient if appropriate. 	Medical and Nursing teams Mortuary Pathology Mortuary