

# Beaumont®

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Content Expert/Coordinating Department(s)	Prior Issue Date	Issue Date
<b>FAMILY BIRTH CENTER ANM(S)/CNS</b>	<b>11/15</b>	<b>12/15</b>

## **Policy**

Perinatal loss is defined as intrauterine death, stillbirth, infant death, or spontaneous abortion. Medical management, optimal emotional support, and nursing care will be provided for the family experiencing perinatal loss.

## **Antepartum Care:**

1. Place a White Dove magnet on the patient's door to notify staff members of a loss before they enter the room (available at the unit secretary desk).
2. Refer to Perinatal Loss Binder & Policy
3. Support grieving parent(s)/family, encourage them to ask questions and verbalize their feelings.
4. Review the grieving process to parent(s)/family. Helping them to understand that everyone experiences grief in their own unique way.
5. Be an active listener. Allow parents to verbalize their feelings and impressions.
6. Notify Spiritual Care @ 1718
7. Initiate perinatal loss forms.
8. Provide consistency in nursing staff, when possible.
9. Review the plan of care, including what to anticipate upon delivery:
  - a. Appearance of the fetus/infant, including cool temperature, skin condition... etc.
  - b. Encourage parent(s) to see and hold their baby to facilitate the grieving process.
  - c. Discuss why photos & mementos are offered and significant for some parents.
10. Offer and explain the options available to the parent(s):
  - a. Naming their baby
  - b. Options for family/friends to see and/or hold the baby
  - c. Photos of the baby may be taken by our staff or Bella Baby if requested
  - d. Other mementos may include the baby's clothing, blanket, foot/hand prints, lock of hair or moldings as appropriate

## **Postpartum Care:**

1. Treat infant with dignity at all times....ie, wrap in a blanket, bring attention to identifiable & fully formed features such as feet, hands, nose....etc.
2. Bathe/clean infant; allow parents to assist if they wish.
3. Offer opportunity for family members to hold infant if parent wishes.
4. Photos, take \*\*ASAP after delivery. A signed consent form must be completed prior to taking photos.
5. Take several different poses, with emphasis on the infant's best features - i.e., hands, feet, etc. \*\*These will be their **ONLY** memories.
6. Prepare mementos (loket of hair, foot molding, footprint, etc.)
7. The digital camera is stored in the pyxis & photos may be printed on the unit.
8. Give **all** photographs/memorabilia to parent(s) prior to discharge. We cannot store them.

## **Discharge Planning:**

1. **If mother is Rh negative, obtain order for Rhogam studies & administration if needed. Give within 72 hours of the loss**
2. Refer to Perinatal Loss Binder & Policies regarding the Final Disposition, required forms and signatures.
3. Provide parents with perinatal loss resources and contact information including Tomorrow's Child. Inform parents of follow-up phone calls by member of Perinatal Loss Team.
4. Provide Perinatal Loss Specific Discharge Instructions using the PNL "smart phrase" in EPIC.
5. Give **all** photographs/memorabilia to parent(s) prior to discharge.
6. Document all pertinent data, including teaching and final disposition decision.

## **GROSSE POINTE – FAMILY BIRTH CENTER POLICY MANUAL**

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## Disposition and Final Arrangements:

**Parent(s) have the choice of the following three options available for final disposition**

1. **Private Funeral Home:** Parent(s) must contact a private funeral home of their choice for the burial or cremation of the fetus/baby.
2. **WBH – A Child Remembered Program individual niche:** (cost approximately \$250.00)
3. **WBH – A Child Remembered Program community interment:** (Free of charge)

**\*\* Indicate the parent(s) choice and obtain signatures on appropriate Disposition Form(s).**

## CARE OF THE FETAL REMAINS/STILLBORN FETUS:

- ❖ Refer to the appropriate gestational age for procedure and necessary paperwork.
- ❖ See Perinatal Loss Binder for guidelines and examples

## CARE AFTER A LOSS FROM CONCEPTION TO 12 6/7 WEEKS GESTATION

- ❖ Orders for pathology exams or cytogenetics are placed in EPIC through the mothers chart
- ❖ Place POC in container with lid
- ❖ Print soft labels
- ❖ Send labeled specimen to Surgical pathology
- ❖ If Cytogenetics are ordered (see laboratory policy for preparation) \*tissue viability 72 hours
- ❖ This gestation is treated as a surgical specimen unless parents request an alternate disposition
- ❖ Notify Surgical Pathology of ordered exam & location of baby @ 1615 (8:30am-5:00pm)  
After hours, contact the pathologist "on-call" via the hospital operator or the Beaumont Smartweb paging system.
- ❖ Contact pathology with any questions.
- ❖ If the parents have a request for disposition, deliver the following paper work to **pathology**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) \***MUST** have parent(s) signature
  - The **Child Remembered Program** is available for any **gestation** if requested by the parent(s).
  - Refer to the Perinatal Loss Binder.

## CARE OF FETUS 13 – 19 6/7 WEEKS GESTATION

- ❖ Orders for pathology exams or cytogenetics are placed in EPIC through the mothers chart
- ❖ Send placenta in covered container with soft labels attached
- ❖ Obtain weight and measurements of the baby and record in Delivery Summary
- ❖ Take photos of the baby as soon as possible with the parent(s) consent. The baby's appearance will deteriorate rapidly. (refer to Perinatal Loss Binder for guidance)
- ❖ When and if the parent(s) have finished viewing/holding their baby, prepare the baby for final disposition as decided by parent(s). (see below)

### **Preparing baby when a pathology exam/autopsy is ordered:**

- Place order in EPIC through the mothers chart
- Place one ID band on baby (*extremity or around body if too small*)
- Wrap in blue pad (*secure with mother's ID sticker*)
- Print soft labels (place all labels in biohazard bag & tape to outside of blue pad)
- Finally wrap a blanket around the baby/blue pad (secure with mothers ID sticker)
- Call security at #3911 for an escort to the morgue
- Place wrapped baby in refrigerator with a **copy** of the Perinatal Loss ID/Disposition form secured to blanket
- Sign the baby into "Morgue Sign-Out Log" as Baby of \_\_\_\_\_ with Mother's MRN
- Notify Surgical Pathology of ordered exam & location of baby @ 1615 (8:30am-5:00pm)  
After hours, contact the pathologist "on-call" via the hospital operator or the Beaumont Smartweb paging system.
- Contact pathology with any questions.
- Deliver the following paper work to **pathology**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) \***MUST** have parent(s) signature
  - **Perinatal Loss Disposition Document** \***MUST** have mothers signature x 2
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

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**If NO Pathology Examination/Autopsy is ordered: Prepare the baby to be picked up by the designated funeral home:**

- Place one ID band on baby (*extremity or around body if too small*)
- Wrap in blue pad (*secure with mother's ID stickers*)
- Finally wrap a blanket around the baby/blue pad (*secure with mothers ID sticker*)
- Call security at #3911 for an escort to the morgue
- Place wrapped baby in refrigerator with a **copy** of the Perinatal Loss ID/Disposition form
- Sign baby into "Morgue Sign-Out Log" as Baby of.....with Mother's MRN #
- Deliver the following paper work to **pathology**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) **\*MUST** have parent(s) signature
  - **Perinatal Loss Disposition Document** **\*MUST** have mothers signature x 2
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

**If the parents prefer that the baby remains with them until the funeral home arrives:**

- Place one ID band on baby
- Wrap in blanket (the funeral home representative will arrive with an appropriate basket/container)
- Deliver the following paper work to **pathology**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) **\*MUST** have parent(s) signature
  - **Perinatal Loss Disposition Document** **\*MUST** have mothers signature x 2
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

**\*IN ALL CASES SECURITY WILL CALL THE FUNERAL HOME WHEN PAPERWORK IS RECEIVED!**

**CARE OF FETUS GREATER THAN 20 WEEKS AND/OR OVER 400 GRAMS**

- ❖ All stillborn babies greater than 20 weeks or over 400 grams **MUST** be buried or cremated
- ❖ Orders for pathology exams or cytogenetics are placed in EPIC through the mothers chart
- ❖ Send placenta in covered container with soft labels attached
- ❖ Obtain weight and measurements of the baby and record in Delivery Summary
- ❖ Take photos of the baby as soon as possible with the parent(s) consent. The baby's appearance will deteriorate rapidly (refer to Perinatal Loss Binder for guidance)
- ❖ When and if the parent(s) have finished viewing/holding their baby, prepare the baby for final disposition as decided by parent(s). (see below)

**Preparing baby when a pathology exam/autopsy is ordered:**

- Place order in EPIC through the mothers chart
- Place one ID band on baby (*extremity or around body if too small*)
- Wrap in blue pad (*secure with mother's ID sticker*)
- Print soft labels (place all labels in biohazard bag & tape to outside of blue pad)
- Finally wrap a blanket around the baby/blue pad (*secure with mothers ID sticker*)
- Call security at #3911 for an escort to the morgue
- Place wrapped baby in refrigerator with a **copy** of the Perinatal Loss ID/Disposition form
- Sign the baby into "Morgue Sign-Out Log" as Baby of.....with Mother's MRN
- Notify Surgical Pathology of ordered exam & location of baby @ 1615 (8:30am-5:00pm)  
After hours, contact the pathologist "on-call" via the hospital operator or the Beaumont Smartweb paging system.
- Contact pathology with any questions.
- Deliver the following paper work to **pathology**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) **\*MUST** have parent(s) signature
  - **Perinatal Loss Disposition Document** **\*MUST** have mothers signature x 2
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

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**If NO Pathology Examination/Autopsy is ordered: Prepare the baby to be picked up by the designated funeral home:**

- Place one ID band on baby (*extremity or around body if too small*)
- Wrap in blue pad (*secure with mother's ID stickers*)
- Finally wrap a blanket around the baby/blue pad (*secure with mother's ID sticker*)
- Call security at #3911 for an escort to the morgue
- Place wrapped baby in refrigerator with a **copy** of the Perinatal Loss ID/Disposition form
- Sign baby into "Morgue Sign-Out Log" as Baby of.....with Mother's MRN #
- Deliver the following completed paper work to **Security**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) **\*MUST** have parent(s) signature
  - **Perinatal Loss Disposition Document** **\*MUST** have mother's signature x 2
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

**If the parents prefer that the baby remains with them until the funeral home arrives:**

- Place one ID band on baby
- Wrap in blanket (the funeral home representative will arrive with an appropriate transport basket/container)
- Deliver the following completed paperwork to **Security**:
  - **Final disposition of stillbirth** (*State of MI ½ sheet*) **\*MUST** have parent(s) signature
  - **Perinatal Loss Disposition Document** **\*MUST** have mother's signature x 2
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

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**CARE OF NEONATE/INFANT BORN ALIVE AND THEN EXPIRES**

- ❖ If an infant shows any signs of life at birth he/she is admitted and a chart is created
- ❖ Place ID bands on baby as usual
- ❖ An infant is considered Non-Viable if less than 23 weeks gestation.
- ❖ A Non-Viable Infant born alive will be evaluated by the pediatric affiliate.
- ❖ Parent(s)/Families are encouraged to spend time with their infant while he/she is alive, if desired.
- ❖ Offer to take photos of infant with parent(s)/family while alive
- ❖ Infants may remain with the parent(s) until there are no further signs of life.
- ❖ The infant must be assessed and pronounced dead by a pediatrician
- ❖ Orders for a pathology exam/autopsy or cytogenetics are placed in EPIC through Baby's chart
- ❖ Send placenta in covered container with soft labels attached
- ❖ Obtain weight and measurements of the baby record in Delivery Summary & Baby's chart (as usual)
- ❖ Take photos of the expired baby as soon as possible with the parent(s) consent.
- ❖ Prepare the parent(s) regarding the baby's appearance and the rapid changes that will occur
- ❖ When and if the parent(s) have finished viewing/holding their baby, prepare the baby for final disposition as decided by parent(s). (see below)

**Preparing baby when a pathology exam/autopsy is ordered:**

- Place order in EPIC
- The ID band without the baby label may be removed and given to parent(s)
- Wrap in blue pad
- Print soft labels (place all labels in biohazard bag & tape to outside of blue pad)
- Finally wrap a blanket around the baby/blue pad (*secure with baby's ID sticker*)
- Call security at #3911 for an escort to the morgue
- Place wrapped baby in refrigerator with a **copy** of the Perinatal Loss ID/Disposition form
- Sign the baby into "Morgue Sign-Out Log"
- Notify Surgical Pathology of ordered exam & location of baby @ 1615 (8:30am-5:00pm)  
After hours, contact the pathologist "on-call" via the hospital operator or Smartweb.
- Contact pathology with any questions.

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- Deliver the following paper work to **pathology**:
  - **Decedent Disposition Document** **\*MUST** have mothers signature x 2 locations
  - **Autopsy Request Form (clinical summary)**
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

**If NO Pathology Examination/Autopsy is ordered: Prepare the baby to be picked up by the designated funeral home:**

- One of the ID bands (without the baby label) may be removed and given to parent(s)
- Wrap in blue pad (*secure with baby's ID stickers*)
- Finally wrap a blanket around the baby/blue pad (*secure with baby's ID stickers*)
- Call security at #3911 for an escort to the morgue
- Place wrapped baby in refrigerator with a **copy** of the Perinatal Loss ID/Disposition form
- Sign baby into "Morgue Sign-Out Log"
- Deliver the following completed paper work to **Security**:
  - **Decedent Disposition Document** **\*MUST** have mothers signature x 2 locations
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

**If the parents prefer that the baby remains with them until the funeral home arrives:**

- One of the ID bands may be removed and given to parent(s)
- Wrap in blanket (the funeral home representative will arrive with an appropriate transport basket/container)
- Deliver the following completed paperwork to **Security**:
  - **Decedent Disposition Document** **\*MUST** have mothers signature x 2 locations
  - **Perinatal Loss ID/Disposition** (*indicate location of baby*)

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## PERINATAL LOSS IDENTIFICATION/DISPOSITION FORM (SAMPLE)

Last Name: \_\_\_\_\_

Mother's MRN/CSN (affix sticker):

Pathology Exam Ordered? Yes \_\_\_\_ No \_\_\_\_

Autopsy Ordered? Yes \_\_\_\_ No \_\_\_\_

Child Remembered Program? Yes \_\_\_\_ No \_\_\_\_

Funeral Home for Final Disposition: \_\_\_\_\_

Current Location of Baby/Fetus:

- Morgue \_\_\_\_ (call security at # 3911)
- Family Birth Center \_\_\_\_ (call charge nurse at # 6055)
- Other (specify) \_\_\_\_\_

\* Make a copy of completed form

1 copy remains with baby/fetus

1 copy remains with paperwork

POPULATION SPECIFIC CONSIDERATIONS:

Women of childbearing age.

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