

Department:	Obstetrics and Gynecology		
Document:	Multidisciplinary Policy and Procedure		
Title:	Labelling, Identification and Registration of Newborn		
Applies To:	All Obstetrics and Gynecology Staff		
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1. PURPOSE:

- 1.1 To standardize the procedure of labelling, identification and registration of newborn.

2. DEFINITIONS:

- 2.1 **Newborn**– from birth to the 28th day of life (4 weeks after birth).

3. POLICY:

- 3.1 All newborn should correctly label and identified at birth.
- 3.2 All newborn should return to the correct mother, if separated for any reason.
- 3.3 All newborn should register with the correct information.
- 3.4 Mother and newborn identification bands must be in place at all times. It is the responsibility of the nurse/ midwife to ensure this.
- 3.5 It is the midwife's/ nurse's responsibilities to ensure newborn are placed with the correct mother at all times.
- 3.6 Under no circumstances, is the gender of the newborn to be disclosed to family members. Family members must visualise the gender of the newborn, themselves.

4. PROCEDURE:

- 4.1 Immediately after vaginal deliver or delivery under regional anesthesia, mother must see her newborn and be sure of the gender.
- 4.2 After delivery, newborn ID bands 2 bands must be placed on the newborn as soon as possible, by the nurse caring for the newborn. To prevent any mix up of newborn.
- 4.3 In case where a newborn needs immediate resuscitative measures and is taken out of the delivery room of the mother, ID bands 2 will be placed as soon as is possible once the newborn's condition is stable.
- 4.4 The details of these two bands must be as follows: (Boy/Girl) of (Mother's name) at (Time) on (Date) newborn MRN.
- 4.5 The two ID bands are to be placed one on each ankle.
- 4.6 The nurse caring for the newborn will check the identification labels and gender of newborn with the Charge Nurse of the delivery suite and both nurses will enter details in the Newborn MRN Register. To ensure correct information is registered in the newborn MRN Register.
- 4.7 If there is the case of an Emergency LSCS and the procedure is performed in the main OR, the nurse from ward is responsible for the newborn and completion of the nursing notes, must identify the gender of the newborn with another responsible person, who must then complete the newborn MRN Register form in L&D by both signing. The infant can be then registered through the correct channels.
- 4.8 The third ID band, written by the mother, with her name or mark, is placed on the newborn, in the mother's presence by the nurse caring for the newborn. Mothers must be able to identify their own newborn.

- 4.9 An ID band is to be placed on the mother with the following details: name of mother, mother's MRN, gender and MRN of the newborn serves as identification cross check.
- 4.10 Newborn must be labelled before transfer from delivery suite.
- 4.11 Mothers must be instructed to check their own name/mark when their newborn is returned to them.
- 4.12 Mothers must be instructed not to remove any ID labels while in hospital and if they notice a band is missing to inform a nurse at once.
- 4.13 All ID bands must be written with a black ballpen. To ensure that information is always legible by using indelible ink.
- 4.14 During each shift, the nurse caring for the mother and newborn must check that the mother and newborn are wearing the ID bands and that they are correct and legible.
- 4.15 If a baby is found with no ID bands at all, the nurse must inform the nurse manager who will conduct a check of all newborn on the ward.
- 4.16 If a newborn is found with a band missing, the nurse must replace it.
- 4.17 Whenever a mother and newborn are separated for any duration or reason the nurse who returns the newborn to its mother must check all ID bands on the mother and newborn. The mother must also check her own name on the ID band she placed on her newborn. To ensure the correct newborn is returned to the correct mother.

5. MATERIAL AND EQUIPMENT:

- 5.1 Newborn ID bands 3.
- 5.2 Adult ID band 1.
- 5.3 Black ballpen.
- 5.4 Newborn MRN Register.

6. RESPONSIBILITIES:

- 6.1 Physician
- 6.2 Nurse

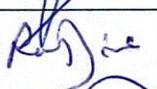
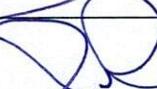
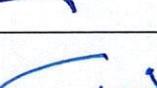
7. APPENDICES:

- 7.1 Vaccination Report to PHCC
- 7.2 Neonatal ICU System Assessment Form
- 7.3 Newborn Identification Form
- 7.4 Newborn Form
- 7.5 Nurses Progress Notes Form

8. REFERENCES:

- 8.1 MOH, Clinical Policies and Procedures.
- 8.2 <https://www.slideshare.net/GopaKumarPgMithrakary/newborn-55211675>.
- 8.3 CBAHI Standard 3rd Edition 2016.
- 8.4 MOH, Guidelines for Obstetrics and Gynecology, Clinical Policies and Procedures.

9. APPROVALS:

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