IDENTIFICATION OF INFANTS

Inadequate labelling increases the risk of infant’s being incorrectly identified. Each infant should have two identibands (ID Bands) and they must be verified as being correct by the person currently taking care of the infant (doctor, nurse or midwife) and the person about to take over that care.

Information on the ID bands should have 3 approved patient identifiers. These include:
- Unique Medical Record Number (UMRN)
- Surname (first name not used routinely in newborn period)
- DOB

If an infant is not able to be given its own white labels with 3 identifiers before going to the ward/nursery from labour and birth suite, then the mother’s label with ‘infant of’ written on it is placed in a clear band. This alerts accepting staff that the infant needs its own UMRN and the ID band changed to approved protocol.

Extra care should be taken with preterm infants where it may be more difficult to apply labels due to multiple lines or fragile skin.

On ward 6B for NETS retrievals and emergency admissions via ED it may also be necessary to hand write labels with 3 patient identifiers until printed ID labels are available.

If at any time an infant is found to be without any ID bands, the identity of all infants present in the area must be verified. Only then may a replacement ID band which has been checked by two nurses, be placed on the infant.

It may be necessary to repeat laboratory investigations (in particular Transfusion Medicine) in the event of a change to surname or admission of first name.

*In the circumstances where there are two or more infant’s with the same or similar names, residing in the same ward/area, “Caution Patient with Same Name” stickers must be used on patient lists, laboratory and x-ray request forms. Extra caution is needed with same sex twins especially prior to first names being given.*