



CLINICAL PRACTICE GUIDELINE

Labour: Birth notification

This document should be read in conjunction with this [Disclaimer](#)

Paperwork

The ward clerk in the unit prepares a set of documents and paperwork required by the midwife to complete following birth. It includes:

1. **Labour and Birth Summary MR230.01** – the midwife completes this and enters the information on the ‘Stork’ computer information system. The Labour and Birth Suite Inpatient summary is then printed out and signed by the midwife.
2. **Labour and Birth Summary MR230.02** - only to be completed for multiple births
3. **Neonatal History MR 410** – provides a summary of the maternal history and birth details.
4. **Vaginal Birth Clinical Pathway MR 249.60** (in case of Caesarean Births, the CS clinical Pathway MR 249.61 is commenced on the obstetric ward)
5. **Care of the Well Neonate MR 425.10** (note: Only Baby ID labels are to be affixed here, **not** the mother’s)
6. **White baby identification bracelets and two inserts.**

Midwife responsibilities

The midwife present at the birth is responsible for:

- Reporting the sex, type and time of birth to the ward clerk. The ward clerk enters these details into TOPAS and the Birth Register and generates a Medical record folder and identification labels with the baby’s unique identification number. The folder with the new baby ID labels is sent up from Admissions to the obstetric ward.
- Completing the Labour and Birth Suite Summary and entering the data into STORK.
- Entering birth details in the Birth Register
- Consider if the Mother is Rh D Negative- see Clinical Guideline, O&G, [Blood Group Management](#): Kleihauer Test.
- Completing the Centrelink “Newborn Child Claim for Paid Parental Leave, Family Assistance and Medicare” form (“Proof of Birth” section on page 18 of the document) by:
 - LBS/FBC midwife if the woman is being discharged home from these areas
 - Ward midwife if the woman is being discharged home from a ward.

- Labelling the newborn with the two white identification bracelets containing maternal identification labels. These bracelets are to be replaced by two white ones containing the neonate's identification details as soon as they become available. See Clinical Guideline, O&G, Patient Administration: Neonatal Identification

Babies born before arrival at KEMH / FBC

- When a midwife or doctor is not present at the birth the receiving midwife completes the above forms, and enters the details in the Birth Register.
- The receiving midwife's name is entered under Supervisor/Witness in the Birth Register. The accoucheur may be entered if known e.g. ambulance officer.
- The midwife's responsibilities remain as above.
- See also KEMH Clinical Guideline, O&G, Labour and Birth- Born Before Arrival

Babies born at planned homebirth (CMP)

- Follow process in the CMP Procedure Manual.

Stillbirth and neonatal death

- Refer to KEMH Clinical Guidelines, O&G: Perinatal Loss- Legalities for information and documentation required.

Documentation for women having a caesarean section

- The midwife attending the birth in theatre is required to take the same forms and documents (as for a vaginal birth) to theatre and record the relevant information.
- The midwife attending the caesarean section is responsible for ensuring the birth details are entered in the Birth Register at the Labour and Birth Suite reception desk.
- Consider if the Mother is Rh D Negative- see Clinical Guideline, O&G, [Blood Group Management](#): Kleihauer Test
- Take an additional 10 patient addressograph labels to theatre.
- For multiple births ensure extra copies of the following are taken for each baby:
 - MR410 Neonatal History
 - MR230.02 Labour and Birth Summary multiple pregnancy forms.
 - Transfusion Medicine Request Forms for cord blood testing (if relevant)
 - 5 extra addressograph labels

Related legislation and policies (list and hyperlink)

Health Act 1911 (Part XIII Section 335- Midwife notification of a birth)

Related WNHS policies, procedures and guidelines

WNHS Policy: Patient Identification




KEMH Clinical Guideline, Obstetrics & Gynaecology:

- Standard Protocols: Kleihauer Ordering of; Kleihauer Postnatal Ordering of; RhD Negative Blood Group Management Kleihauer Test
- Patient Identification: Neonatal Identification
- Perinatal Loss

Useful resources (including related forms)

Forms:

- Labour and Birth Summary MR230.01
- Labour and Birth Summary MR230.02 - multiple births
- Neonatal History MR 410
- Vaginal Birth Clinical Pathway MR 249.60
- Caesarean Section Clinical Pathway MR 249.61
- Care of the Well Neonate MR 425.10

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