



## CLINICAL PRACTICE GUIDELINE

Guideline coverage includes NICU KEMH, NICU PMH and NETS WA

# End of Life Care: Last Office

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

The term 'last offices' is used to describe the process of preparing a deceased infant's body for transfer to the mortuary.

Parents should be offered and strongly encouraged to participate and to make mementos/memories of their infant.

### Key Points

- Just prior to or immediately after death, a **Newborn Screening Test (NBST)** should be taken either from umbilical or arterial line. If the infant has no catheter one attempt should be performed to obtain sample and if unsuccessful document this in infant's notes.
- Preparation of the infant's body should be done in a private, quiet room, such as a parent room or the mother's room if she is still an inpatient. Religious and cultural considerations should be discussed with the parents. Notify Pastoral care for support and guidance.
- Once permission has been granted from the coroner all peripheral and central catheters, intercostal catheters, endotracheal tubes etc. can be removed. If permission is not granted, these catheters should where possible be coiled and taped to the infant's body. **Refer to WNHS Policy: Coronial Matters** for further information.
- If not a coroner's case and the parents' consent to a post mortem examination to be performed, it is a good idea to leave all lines in for the Pathologist to examine.
- The parents should be informed of their right to take their infant home with them for a time if they wish. Complete **MR295.95: Permission to Transport Deceased Baby**, for the parents to carry with them.
- Parents should be referred to the Perinatal Loss Service, irrespective of the infant's age or gestation at the time of death. Complete **MR235 NCCU Perinatal Loss Referral and Neonatal Death Checklist**.

### Contents of Perinatal Loss Pack /Bereavement Pack

- Brochures: Pastoral Care Services, Non-Coronial Post Mortem Examinations, After the Death of Your Baby.
- NCCU Perinatal Loss Service Handover and Checklist.
- BDM201 Medical Certificate of Cause of Stillbirth or Neonatal Death.
- BDM202 Medical Certificate of Cause of Death.
- Executive Director Public Health notification form.
- Special Referral to Child Health Services.

- Death in Hospital MR001.
- Death Notification form (PMH only).
- Form 7 Cremation Act. Certificate of Medical Practitioner.

## Equipment

<ul style="list-style-type: none"> <li>• Infant bath or washbowl</li> <li>• Towels and washcloths</li> <li>• Cuddly</li> <li>• Scales and tape measure</li> <li>• Clothes or Baptism gown chosen by parents</li> <li>• Disposable nappy, Sheet.</li> <li>• Creating Memories booklet and Memory Box</li> <li>• Perinatal Loss Pack/Bereavement Pack</li> </ul>	<p><b>Mortuary box containing:</b></p> <ul style="list-style-type: none"> <li>• 2 x name bands</li> <li>• Nametags x 2 for addressograph labels</li> <li>• Safety pins x 4</li> <li>• Scissors</li> <li>• Clear ziplok bag for lock of hair</li> <li>• Inkless wipe and card (hand and foot prints)</li> <li>• Blueys</li> </ul>
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## Procedure

1. The infant is weighed and a head and length measurement is taken and recorded.
2. Take footprints and handprints using the inkless wipe. A lock of hair can be placed in the booklet with the consent of the parents.
3. The infant is bathed, dried and dressed in clothes of choice by the parents. Baptism dresses, bonnets and woollens are available, or the parents may provide their own clothing.
4. Original name bands x2 are replaced so the originals can be given to the parents as mementos. Photographs are to be taken. If the infant is from a multiple birth, encourage taking photos with his/her sibling(s) as the parents may not have any photographs of their children together.
5. Parents may place a special toy or blanket with their infant. Give the parents and family as much time as they need. When they are prepared for their infant to go to Perinatal Pathology, reassure them that their infant's body will be kept safe and treated with respect. If they wish to meet with a staff member from Perinatal Pathology so they know who is looking after their infant, contact Perinatal Pathology.
6. Once the family has completed their goodbyes, a label with an addressograph attached is pinned to the infant's outer clothing.
  - At KEMH, the infant is then wrapped in a bluey and then in a sheet which is secured closed with nappy safety pins. A second label with an addressograph attached is pinned to the outside of the sheet. An orderly is paged to bring the Moses basket to the nursery to take the infant to the mortuary. A nurse may escort the infant to the mortuary. Complete the Orderly Mortuary Book. Notify the ward clerk or Admissions/Bedstate to update TOPAS.
  - At 6B, the infant is then wrapped in a blanket and then in a sheet which is secured closed with nappy safety pins. A second label with an addressograph attached is pinned to the outside of the sheet. The infant is then taken in arms by nursing staff with an orderly/PCA to the mortuary.

Complete the Mortuary Register. Notify the ward clerk or Admissions to update TOPAS.

<b>Memories Booklet:</b> Cot card and all photos, baptism certificate, infant details, HC, length.	<b>Memory Box:</b> All mementos (name bands, BP cuff, tape measure, spare disposable ECG leads, strappit etc.). These items 'belonged' to the infant and help form an identity.
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**Also refer to Government of Western Australia - Department of Health: [Notification of Perinatal and Infant Deaths](#).**

## Related WNHS policies, procedures and guidelines

[Department of Health: Notification of Perinatal and Infant Deaths](#)

WNHS Policy: [Coronial Matters](#)

CAHS Policy Manual: [Coronial Matters](#)

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