



CLINICAL GUIDELINE	
Identification of the Infant	
Scope (Staff):	Nursing and Medical Staff
Scope (Area):	NICU KEMH, NICU PCH, NETS WA
Child Safe Organisation Statement of Commitment	
<p>The Child and Adolescent Health Service (CAHS) commits to being a child safe organisation by meeting the National Child Safe Principles and National Child Safe Standards. This is a commitment to a strong culture supported by robust policies and procedures to ensure the safety and wellbeing of children at CAHS.</p>	

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

Aim

Each patient admitted to the neonatal unit at PCH and KEMH are to have two correctly labelled identibands secured.

Risk

Inadequate labelling increases the risk of infant’s being incorrectly identified. Each infant at KEMH and PCH should have two identibands (ID Bands) attached from admission to the unit.

Patient identification is to be verified (checking of ID bands) when clinical care is handed over from one staff member to another (nurse, midwife, doctor). Refer to [Clinical Handover](#) guideline.

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.

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 3B for NETS WA 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.

Baby identification is to be checked prior to any treatment or procedure, collection of pathology samples, blood transfusions, drug administration, X-rays.

Missing or Incorrect Baby Identibands

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.

The shift coordinator is to be notified immediately.

The identity of all the infants in the area (nursery) must be check and verified.

Only when the identification of the infant has been confirmed, may a replacement ID band that has been check by 2 nurses be placed on the baby.

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 infants 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.

Neonatal Identification while creating photographic memories

A camera is available in each nursery for staff to take photos of babies for parents. If a photo is not to be immediately printed by the staff member taking the photo the following process must take place.

- The baby cot card is to be placed next to the baby and included with the first photo. This ensures when loading photos onto a disc or USB for parents the correct series of photos are uploaded.

Related CAHS internal policies, procedures and guidelines

[CAHS Clinical Incident Management](#)

[Clinical Handover](#)



[PCH Patient Identification](#)

References and related external legislation, policies, and guidelines

WNHS Policy – [Patient Identification](#)

Australian Commission on Safety and Quality in Health Care – [Patient Identification](#)

This document can be made available in alternative formats on request for a person with a disability.

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Compassion

Excellence

Collaboration

Accountability

Equity

Respect

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