

ARROWHEAD REGIONAL MEDICAL CENTER
MOTHER-BABY UNIT POLICIES AND PROCEDURES
2024-2025 Summary of Policy Revisions

Policy #	New	Major	Minor	Reviewed	Policy Title	Explanation (All New Policies and Major Revisions)
			X		Table of Contents	
103.00 Issue 4				X	Organizational Chart Narrative	
104.00 Issue 4				X	Disaster Plan	
105.00 Issue 1				X	Emergency Evacuation Plan	
129.00 Issue 7			X		Scope of Service	
201.01 Issue 7		X			Admission Criteria to the Mother-Baby Unit	For antepartum patients, specified admission criteria to Mother-Baby. Added stable Antepartum patients without active “labor and less than 36 weeks gestation.” Removed Preterm rupture of membranes without active labor and removed placenta previa. Added readmitted patients within 6 weeks postpartum meeting Mother-Baby admission and readmitted Obstetrics (OB) services. Added patients not meeting criteria, patients on Telemetry, placenta previa, & preterm premature rupture of membranes without active labor. Removed Department of Nursing Policy No. 584 “IV’s with medication.” Updated reference. Removed Joint Commission.

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201.03 Issue 6		X			Assessment and Reassessment of the Newborn	Removed Licensed Vocational Nurse (LVN) responsibilities (no LVN in Mother-Baby Unit). Simplified assessment details. Referred to Pediatric Nursing Procedures "Health Assessment of the Child," for assessment documentation details. Added Skin Integrity Assessment under skin assessment. Removed specific need of documentation listed for each system. Added refer to Maternal Child Health (MCH) Policy No. 5211, Circumcision. Removed pulse documentation details. Removed "as ordered" for Blood pressure and added "if ordered and applicable." Removed naming the assessment for pain assessment scale. Added refer to Administrative Policies and Procedures (ADM) Policy No. 620.05, Pain Assessment and Management. Removed feeding/bonding "in every 2 to 4 hours" and changed to "as it occurs." Removed items in environment and safety. Removed details for chemstrip and added, if indicated. Removed Parent's religious or spiritual preferences. Removed the following references: Dept of Nursing Policy and Procedures Manual Policy No. 528, The Joint Commission. Updated Core Curriculum for Maternal-

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						Newborn reference. Added list of policies referred in the policy.
201.04 Issue 6		X			Assessment and Reassessment of the Postpartum Patient	Removed Licensed Vocational Nurse (LVN) responsibilities (no LVN in Mother-Baby Unit). Removed specifics on Quantitative Blood Loss (QBL) amounts and referenced Hemorrhage policy. Simplified Assessment details. Removed portion on Duramorph, since this is not our practice. Removed specifics on Magnesium Sulfate and referenced Magnesium Sulfate policy. Removed pain reassessment specifics. Removed specifics on Environment and safety Removed (October-May) flu vaccination and stated "Follow hospital guidelines." Removed patient religion. Removed specifics on Assessment and will only list body systems have assessed. Added Skin integrity assessment. Updated breastfeeding documentation to state "breastfeeding status" and breastfeeding risk factors. Removed the Deep Vein Thrombosis (DVT) specifics in musculoskeletal. Added to document DVT Risk assessment. Added electronic "health" record (EHR). Removed Morse Fall scale and added "Fall Risk Assessment." Removed Joint Commission

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						Reference. Added list of policies referred to in the policy. Removed title 22 reference.
201.05 Issue 6		X			Admission of the Transitioning Newborn	Removed specific location where newborn assessments take place and replaced with physical assessment within 2 hours. Removed Labor & Delivery (L&D) Registered Nurse (RN) and switched it with a RN. Removed the time frame of administering Erythromycin and Vitamin K medications and referenced Maternal Child Health (MCH) Policies. Removed S.O.F.T intervention. Removed L&D and added “assuming care of newborn.” Removed the time frame of performing initial newborn bath and added, upon request of mother after 24 hours of birth. Removed Joint Commission reference. Updated reference. Added list of policies referred to in the policy. Removed title 22 reference.
202.00 Issue 4		X			Breastfeeding Supplementation: Alternative Methods	Combined asymptomatic and symptomatic hypoglycemia management of the newborn and referenced the policy. Changed the word starvation to “suboptimal intake.” Added where diagnostic “tools have ruled out causes of infant hyperbilirubinemia.” Added “such as for the rare infant with inborn errors

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						of metabolism.” Added “abnormal breast shape.” Removed “use of 5 French oral gastric tube and 20mL syringe.” Switched to “oral” syringe. Updated the amounts of mL supplementation. Removed discharged summary teaching tool. Reworded last sentence, Lactation referral for formal feeding plan while supplementing with expressed breast milk, donor human milk, or breast milk substitute. Removed the Joint Commission Reference. Updated the reference. Added policy referred to in the policy. Removed title 22 reference.
204.01 Issue 4		X			Deep Vein Thrombosis: Monitoring and Prevention	Remove from Mother-Baby Unit Policies and Procedures. Add to Maternal Child Health Policies and Procedures, Policy No. 5600 issue 1
204.02 Issue 4			X		Discharge of the Postpartum Patient	
204.03 Issue 7			X		Discharge of the Newborn	
204.04 Issue 5		X			Duramorph Anesthesia: Postoperative Management	Delete. Duramorph Anesthesia is no longer utilized for postpartum patients. Following Practitioner orders and checking pain levels.
205.00 Issue 2		X			Gastric Lavage and Gavage Feeding	Delete. Not community standard. No longer evidenced based practice.
219.01 Issue 7		X			Sepsis: Neonatal	Remove from Mother Baby Unit Policies and Procedures. Add to

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						Maternal Child Health Policies and Procedures Policy No. 5500 Issue 1.
221.00 Issue 2		X			Transcutaneous Bilimeter: Use of	Removed specific language on performing quality control test. Removed specific language on performing a Transcutaneous Bilirubin (TcB) measurement. Referred to manufacturer guidelines. Removed phototherapy as a contraindication for TcB. Added Provider notification, “when TcB screening results at or above the high-risk zone.” Updated references. Edited Jaundice definition to match reference. Jaundice is the yellow color seen in the skin of many newborns. It is caused by a chemical in the blood called bilirubin. Most babies have mild jaundice that is harmless, but in rare cases, the bilirubin level can get very high and might cause brain damage.