

STANDARD ORDERS Maternal Neonatal Death (For neonatal deaths prior to discharge from the hospital only)

NB: These orders are to be used as a guideline and do not replace sound clinical judgement and professional practice	
standards. ■ Indicates Standard orders. If not in agreement with an order, cross out and initial. □ Requires a check I for activation.	
INVESTIGATIONS	GENERAL ORDERS
Allergies: 🗆 No 🗆 Yes Describe:	
DATE:	TIME:
 CBC Type and Screen INR Hgb A1C Kleihauer-Betke (post delivery) Lupus panel Nuclear Ab (ANA) Phospholipids Antibodies Blood Cultures (aerobic & anaerobic) Sexually transmitted and bloodborne infections: HIV Chlamydia (urine) Gonorrhea (urine) Hepatitis B Hepatitis C Syphilis Toxoplasmosis Varicella Parvovirus Rubella Cytomegalovirus 	 Offer spritual care and social work referrals Complete Public Health Referral Complete Loss of Baby Release Form
PHYSICIAN / MIDWIFE	PHYSICIAN / MIDWIFE
SIGNATURE	NAME
ORDER TRANSCRIBED DATE: TIME: INITIAL:	