

Royal Hospital for Women (RHW)
BUSINESS RULE
COVER SHEET



Health
South Eastern Sydney
Local Health District

Ref:T24/32363

NAME OF DOCUMENT	Placenta- Removal from Hospital by Parents
TYPE OF DOCUMENT	Clinical Business Rule
DOCUMENT NUMBER	RHW CLIN047
DATE OF PUBLICATION	20 May 2024
NATIONAL STANDARDS	Standard 2 - Partnering with Consumers Standard 3 – Preventing and Controlling Infections Standards Standard 6 – Communicating for Safety
RISK RATING	Low
REVIEW DATE	May 2029
FORMER REFERENCE(S)	N/A
EXECUTIVE SPONSOR	Midwifery Clinical Co-director of Maternity Services
AUTHOR	S Arbidans CMC Practice Development
SUMMARY	Safe handling and disposal of placenta outside of hospital

Royal Hospital for Women (RHW)

CLINICAL BUSINESS RULE

Placenta – Removal from Hospital by Parents

RHW CLIN047

This Clinical Business Rule (CBR) is developed to guide safe clinical practice at the Royal Hospital for Women (RHW). Individual patient circumstances may mean that practice diverges from this Clinical Business Rule. Using this document outside RHW or its reproduction in whole or part, is subject to acknowledgement that it is the property of RHW and is valid and applicable for use at the time of publication. RHW is not responsible for consequences that may develop from the use of this document outside RHW.

1. BACKGROUND

A woman may wish to take her placenta home following birth, instead of the hospital disposing of it.

2. RESPONSIBILITIES

2.1 Midwifery and medical staff – assessment of the placenta, membranes and cord vessels. Ensure placenta is in correct container and labelled appropriately. Complete appropriate paperwork and file in woman's notes

3. PROCEDURE

3.1 Clinical Practice

- Ensure appropriate Personal Protective Equipment (PPE) is worn and complete physical assessment of placenta, membranes and cord vessels as per CBR [Placental examination and Indications for Referral to Pathology](#)
- Place placenta, membranes and cord in two sealed plastic bags and then place in sealed bucket
- Label container with woman's correct hospital identification label:
 - If placenta to be sent for histopathology, note on pathology request form and sealed container **"KEEP TISSUE FOR RELEASE"**. Following steps for collection and release from Histopathology:
 - Anatomical pathology will contact Birth Unit staff when report is complete and placenta is ready for release.
 - Birth unit staff will contact the woman and organise a date and time for pick up. (Note: pathology need minimum 2 hours to rinse placenta with unrefrigerated time kept to a minimum).
 - Birth Unit staff will collect placenta from pathology, completing correct paperwork.
 - Birth Unit staff will release placenta to parents with relevant instructions for burial.
 - Inform parents that placenta for collection during business hours only (Monday to Friday 8am to 430pm)
- Instruct parents:
 - The placenta cannot be taken to the postnatal ward, nor stored in any hospital refrigerator
 - Placenta should be taken home as soon as possible
 - Burial of their placenta should take place within eight hours of removal from a refrigeration unit
 - The placenta should remain in the sealed container until ready for burial/disposal or encapsulation
 - The placenta is a potential infection risk and handling should be kept to a minimum
 - The placenta must be disposed of according to local council regulations
 - The placenta can be returned to the hospital for disposal as per hospital procedure
- Give the parents a copy of the instructions on "If you are taking the placenta home"(appendix 1) and the letter 'certifying authorisation to travel with human tissue⁴' (appendix 2)
- Ensure completion of "Authorisation of the release of tissue to a patient or next of kin" SMR020.033 (see appendix 3) and file in clinical notes¹

3.2 Documentation –

- Electronic Medical Record
- Authorisation of the release of tissue to a patient or next of kin form

Royal Hospital for Women (RHW)

CLINICAL BUSINESS RULE

Placenta – Removal from Hospital by Parents

RHW CLIN047

3.3 Educational Notes -

- Parents should contact their local council if planning to bury their placenta to confirm local council rules and obtain the necessary approval²
- Permission should be obtained from the owners of the property prior to the burial of a placenta²
- Human tissue should not be buried in a location likely to contaminate domestic, drinking or groundwater supplies²
- The placenta should be buried at no less than 900mm below the natural surface of the soil to avoid accidental exhumation, including by animals²

3.4 implementation, communication and education plan:-

The revised CBR will be distributed to all medical, nursing and midwifery staff via @health email. The CBR will be discussed at ward meetings, education and patient quality and safety meetings. Education will occur through in-services, open forum and local ward implementation strategies to address changes to practice. The staff are asked to respond to an email or sign an audit sheet in their clinical area to acknowledge they have read and understood the revised CBR. The CBR will be uploaded to the CBR tab on the intranet and staff are informed how to access this.

3.5 Related Policies/procedures

- [Third stage management following vaginal birth](#)
- [Placenta examination and Indications for Referral to Pathology](#)

3.6 References

1. NSW Health. Authorisation of the Release of Human Tissue to a patient or next of kin. SMR020.033.
2. NSW Government. 2022. Burials on private land
3. NSW Department of Health Circular 2007_036 Infection Control
4. NSW Health PD2022_035 Organ and Tissue Donation, Use and Retention

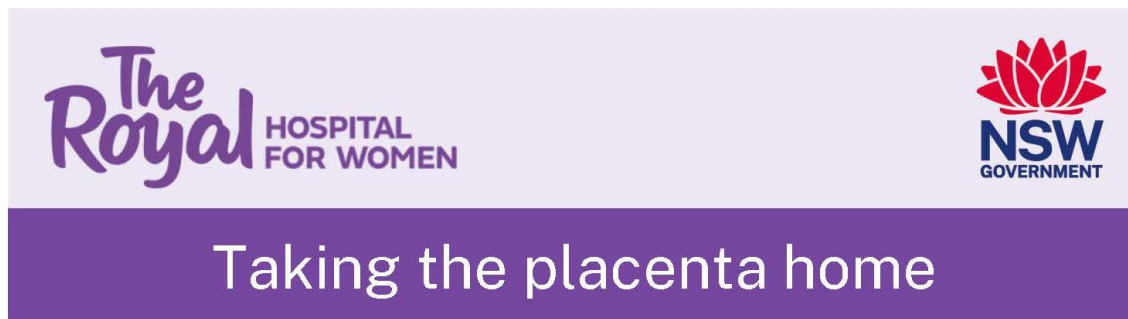
4. CULTURAL SUPPORT

- When clinical risks are identified for an Aboriginal woman, they may require additional supports. This may include Aboriginal health professionals such as Aboriginal liaison officers, health workers or other culturally specific services.
- For a Culturally and Linguistically Diverse CALD woman, notify the nominated cross-cultural health worker during Monday to Friday business hours
- If the woman is from a non-English speaking background, call the interpreter service: [NSW Ministry of Health Policy Directive PD2017_044-Interpreters Standard Procedures for Working with Health Care Interpreters.](#)

5. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
Reviewed and endorsed Maternity Services LOPs 11/4/17 Approved Patient Care Committee 8/5/08 Reviewed and endorsed Obstetrics Clinical Guidelines group March 2008 Replaced 'Disposal of the Placenta' approved Quality Council 15/7/02		
6.5.24	4	Endorsed at BRGC

Appendix 1



March 2024

Safety tips for Handling the Placenta

- The placenta is to be placed in 2 sealed plastic bags and sealed in a labelled bucket.
- Optimal storage to prevent deterioration of the placenta is in the refrigerator or freezer as soon as possible after birth.
- It is preferable that a family member or support person attending takes the responsibility for prompt storage.
- Those handling the placenta should wear waterproof gloves to prevent transmission of any possible germs from the placenta.
- Avoid contact between blood from the placenta and breaks in the skin such as cuts, burns or sores. Avoiding contact between blood and the eyes, nose or mouth.
- If blood does contaminate any of these areas of the body, wash the blood off immediately with soap and water. Avoid using soap in the eyes, just wash with plenty of water.
- If blood contamination has occurred to an break in the skin or eyes, nose or mouth, seek medical advice.
- Wash hands thoroughly with soap and water after any contact with the placenta or blood and after removing gloves.
- Clean up any spills of blood using detergent and water while wearing gloves.

Burial of Placenta

- Permission of the property owner and permission from the local council must be sought if buried on private property.
- Human tissue is not to be buried in a location likely to contaminate a drinking water supply or domestic water supply; there must be no risk of contamination including to ground water supplies.
- The placenta should be buried no less than 900mm below the natural surface of the soil, this is the minimum depth at which tissue should be buried to avoid accidental exhumation including by animals.
- Do NOT bury near a river or creek, and do NOT bury it in public land/parks/reserves.
- If you are unable to dispose of your placenta you may return it to RHW in a leak proof container and the hospital will dispose of it.

Adapted from Organ and Tissue Donation, Use and Retention. NSW Ministry of Health PD2022_035 and NSW Government Burial on private land 2022

Endorsed 1/4/2024. Reviewed by clinicians and consumers in development stage 22/03/2024
Should you wish to discuss any aspect of this information please send an email to RHWfeedback@health.nsw.gov.au

Royal Hospital for Women (RHW) CLINICAL BUSINESS RULE



Health
South Eastern Sydney
Local Health District

Placenta – Removal from Hospital by Parents

RHW CLIN047

Appendix 2



Health
South Eastern Sydney
Local Health District

To whom it may concern,

This is to certify that _____
(Name of person authorised to travel with human tissue in their possession)
is travelling with human tissue in their possession.

The tissue is sealed inside a container and there is no risk associated with transporting the tissue stored in this manner.

Person certifying the packaging of the tissue:

Name: _____

Designation: _____

Institution/Hospital: _____

Contact: _____

Signature of authorising person: _____ Date: ____/____/____



Royal Hospital for Women
ABN 70 442 041 439
Randwick Hospitals Campus, Barker Street
Locked Mail Bag 2000
Randwick NSW 2031
Tel: (02) 9382 6111 Fax: (02) 9382 6513
Website: www.seslhd.health.nsw.gov.au/royal-hospital-for-women



Royal Hospital for Women (RHW) CLINICAL BUSINESS RULE



Placenta – Removal from Hospital by Parents

RHW CLIN047

Appendix 3



SMR020033

Holes Punched as per AS2828.1: 2012
BINDING MARGIN - NO WRITING

NH609654 141015

 Facility: AUTHORISATION OF THE RELEASE OF HUMAN TISSUE TO A PATIENT OR NEXT OF KIN	FAMILY NAME		MRN
	GIVEN NAME		<input type="checkbox"/> MALE <input type="checkbox"/> FEMALE
	D.O.B. ____/____/____		M.O.
	ADDRESS		
	LOCATION / WARD		
COMPLETE ALL DETAILS OR AFFIX PATIENT LABEL HERE			

Note:

- The completed form must be retained as part of the deceased's Medical Record
- The person collecting the tissue must complete the form. The person could be the patient, the patient's senior available next of kin or their authorised delegate or a funeral director if the tissue is to be buried or cremated under the management of a contracted funeral director.

A. DETAILS OF THE TISSUE(S) TO BE RELEASED

Date of procedure ____/____/____ or date of death of patient ____/____/____

Tissue(s) to be released _____

B. DETAILS OF PERSON COLLECTING TISSUE(S) (tick applicable option)

☐ Patient
OR
☐ Senior available next of kin or delegate
OR
☐ Funeral Director arranging funeral services on behalf of the senior available next of kin

Name (print) _____

Address _____

Company (if Funeral Director) _____

This is to confirm that I:

☐ have received the stated tissue(s);
☐ understand the instructions for the safe handling of human tissue;
☐ have been made aware of my obligations under the Public Health Regulation 2012 for the disposal of bodies or tissue(s) and agree to abide by them

I am not aware of any other person with an interest in the tissue(s) who does not agree with this decision,

Signature of person collecting tissue

Date

C. PERSON AUTHORIZING RELEASE OF ORGAN(S)/ TISSUE(S)

Name (print) _____

Designation _____

Hospital extension/pager number/mobile _____

Signature of person authorising release

Date

AUTHORISATION OF THE RELEASE OF HUMAN
TISSUE TO A PATIENT OR NEXT OF KIN
SMR020.033

NO WRITING

Page 1 of 1