

OBSTETRICS/NEWBORN

Self-Assessment Questions	YES	NO	N/A	Date/Initials	Comments
Is erythromycin 0.5 percent ophthalmic ointment or tetracycline one percent ophthalmic ointment being applied topically to the eyes of all newborns?? *Special provision if objection on the basis of religious beliefs19 CSR 20-26-010 210.070 RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital have a policy for referring infants affected by substance abuse, withdrawal symptoms resulting from prenatal drug exposure, or Fetal Alcohol Spectrum Disorder? 191.737 RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital have written and approved policies for the final disposition of the remains of a human fetus? 194.384, RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Within 24 hours after a miscarriage, does the hospital inform the mother (orally and in writing) of her right to determine the final disposition of the remains of the fetus? 194.387, RSMo and 194.200, RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital provide counseling or refer the mother to appropriate services for counseling concerning the death of the fetus? 194.387, RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Does the hospital offer a DHSS approved shaken baby syndrome video for viewing? 191.748, RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is every newborn delivered screened for critical congenital heart disease with pulse oximetry or in another manner as directed by the department of health and senior services in accordance with the American Academy of Pediatrics and American Heart Association guidelines? 191.334 RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Is every newborn tested for metabolic and genetic disorders as prescribed by DHSS? 19 CSR 25-36.010 191.331 RSMo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Are hearing screenings done in accordance with DHSS established methodologies and procedures? 19 CSR 40-9.010	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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19 CSR 40-9.020 19 CSR 40-9.040 191.925 RSMo					

Key Resources and Links

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- [Missouri Revisor of Statutes](#)
- [Missouri Code of State Regulations-DHSS-Title 19](#)