

Appendix 3

Process for the follow-up of the newborn where any manoeuvres have been used to expedite shoulder dystocia at delivery

Midwife checking baby following shoulder dystocia should refer all babies to

A paediatric registrar/consultant for review



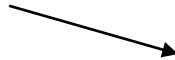
Document referral in notes and communication between maternity and paediatric team



Document information given to the mother in the notes



Paediatric consultant will arrange for x-ray



If x-ray confirms fracture to the clavicle

If x-ray confirms no break - observe



Referral is needed to the paediatric physiotherapy department. This should be done by either bleeping the physiotherapist on 1278, or speaking to a physiotherapist in the department to ensure that the baby is seen the same day. This should also be in conjunction with a paper referral form (located on Beatrice Postnatal ward) and documentation in the medical notes.



Regular analgesia is administered as prescribed



- The physiotherapist will assess the baby and document muscle activity. They will teach the parents how to protect their baby's arm to minimise further damage and facilitate recovery. The physiotherapist will issue an information leaflet (ICID Erb's Palsy, 2007) to the parents, which also includes the name and contact number of the physiotherapist.
- An appointment will be offered after 2 weeks to check on progress and a 2nd information leaflet given regarding stretching exercises (ICID Erb's Palsy – home stretching programme, 2007) will be given to the parents. If arm recovery is progressing the physiotherapist will continue to monitor the situation. If after 2-4 months significant recovery is not being achieved the baby will be referred to a paediatrician.