# **Placenta Removal from Hospital UHL Obstetric Guideline**



Trust Ref: C32/2020

"Currently UHL utilises the terms 'woman' and 'women' within their obstetric and maternity guidelines but these recommendations will also apply to people who do not identify as women but are pregnant or have given birth."

### 1. Introduction and Who Guideline applies to

This guideline is aimed at all midwives involved with the care of women during the intrapartum period.

#### 2. Guideline Standards and Procedures

The Trust (UHL) has a responsibility for the safe handling and disposal of all human tissue, including placentae.

Occasionally parents request that they are allowed to take their placenta home with them. Therefore, this guideline has been produced following consultation with Consultant Communicable Disease Control (CCDC), Infection Control Team and Senior Midwives. A placenta is "human tissue", which must be incinerated at a high temperature or buried at a significant depth and not placed in domestic or council waste bins. It is the parents responsibility to ask their local council if there are any particular guidelines to be followed.

It is recommended that the following guidelines are followed and that the Midwife instructs the mother on safe disposal procedure.

Parents who have a delivery, uncomplicated by infection pre or post-delivery may be allowed to remove the placenta from the hospital.

As the trust has a duty to ensure the safe disposal of human tissue, clarification must be sought by the midwife as to the final disposal, particularly if the parent intends to take the placenta overseas.

#### 2.1 For the Disposal outside the Trust

- The placenta must be placed in a small white plastic bag and then placed in a plastic sealable container or double bagged ensuring the bag is tied securely.
- As the placenta will rapidly deteriorate it needs to be taken home as soon as possible after the birth and stored in a cool place.
- It should be stored in a refrigerator that does not contain any food and buried within 48 to 72 hours.
- Alternatively the placenta can be kept in its container, on ice for no more than 48 hours prior to burial.
- It is important to remove the placenta from the plastic sealable container and plastic bag prior to burial.
- The parent should be advised to bury the placenta deeply in the garden in order to prevent scavenging animals from digging the placenta up.
- Place an identifying marker to prevent accidental exposure at a later date
- While the risk of getting an infection from a healthy placenta is not high, standard hygiene precautions should always be followed;

- cover any cuts or abrasions
- wear protective gloves
- wash hands thoroughly afterwards
- The placenta must not be disposed of in the domestic or council refuse
- The placenta must be buried on private property and not in public places such as parks or cemeteries.
- A form must be signed by the parent accepting responsibility for the safe disposal of the placenta. This form must also be signed by the midwife (see Appendix A). One Copy of appendix A to be placed into the hospital records, one copy to be given to parent for their records and one copy to be sent to document lead to audit compliance.
- Should it be the intention of the parent to take the placenta overseas for burial, it must be explained to the parent that it is their responsibility to inform the airline of their intention to export human tissue.
- The midwife who hands over the placenta to the parent must ensure the appropriate documentation is placed in the case notes and entered into the electronic medical records.
- The placenta should be preferably be given to the parent. However, should they be remaining in hospital for several days, the partner or close relative may take responsibility for the removal of the placenta.
- Note: if the woman has an infection or is a carrier of a blood borne infection, the placenta must be retained by the Trust for disposal by incineration.

#### 2.2 Placental Encapsulation

Although there are no proven health benefits, some women choose to take their placentas home for consumption for personal, spiritual or cultural reasons. Where a woman/person chooses to employ a placental encapsulation company, they must ensure the company is registered as a food business with the local environmental health office and has a food hygiene rating.

- If there is a plan to take the placenta for consumption, such as encapsulation, the woman/person must tell their midwife before the birth.
- The company will provide a chiller pack containing everything needed for safe storage of the placenta.
- Once born, the midwife handles the placenta with sterile gloves and places it as soon as possible into the chiller pack.
- Placental remains from the encapsulation process must be treated as human tissue and buried as described above.

## 3. Education and Training

None

### 4. Monitoring Compliance

What will be measured to monitor compliance	How will compliance be monitored	Monitoring Lead	Frequency	Reporting arrangements
Patient information provided	Audit	Guideline Lead	As required	Audit group

### 5. Supporting References

https://www.theboltonnews.co.uk-2019 Placental remains found near cemetery, police statement.

https://publicdocuments.sth.nhs.uk/pd9728 ReleaseOfHumanTissue.pdf -Sheffield teaching hospitals NHS Foundation Trust 2022

https://placentaremediesnetwork.org/placenta-remedies-businesses-to-be-regulated-in-the-uk/ accessed on 29 March 2023

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### 6. Key Words

Encapsulation, Removal of placenta

The Trust recognises the diversity of the local community it serves. Our aim therefore is to provide a safe environment free from discrimination and treat all individuals fairly with dignity and appropriately according to their needs.

As part of its development, this policy and its impact on equality have been reviewed and no detriment was identified.

CONTACT AND REVIEW DETAILS					
Guideline Lead (Name and Title)			Executive Lead		
Original author; Hayley Archer - Clinical Risk and			Chief Nurse		
Quality Standards Midwife					
Reviewed by ; L Taylor – Clinical risk & quality					
standards midwife					
Details of Changes made during review:					
Determination of Oherman (If Ann.)					
Date	Issue Number	Reviewed By	Description Of Changes (If Any)		
April 2020	1		New document		
July 2023	2	L Taylor	Changed terminology of patient to parent		
		H Fakoya	throughout		
		Maternity guidelines	Added encapsulation advice		
		group	Infection prevention guidance added		
		Maternity			
		Governance			

Next Review: July 2026

### **APPENDIX A:**

# The removal of placenta by the patient from the Trust

I (Full Name)
Of
(Full Address)
Wish to retain the placenta from the birth of my child, and intend to remove it from the hospital and dispose of the placenta.
I understand that should I wish to take the placenta abroad I will notify the airline.
The midwife has fully explained to me the procedure of placenta disposal.
Signed
Date
Signature of Midwife
Name of Midwife(BLOCK CAPITALS)
Date