

Home Birth Supplies Program

Procedure Manual

July 2025

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1. Introduction

The BC Home Birth Supplies Program (HBSP) came into effect April 1, 2016. It is a standardized program for all care providers attending home births in the province, which enables access to supplies, equipment, medications and medical device reprocessing services for use at home births. This document is intended to provide an overview of the structure and administration of the program.

1.1 Background

In January 2015, the Midwifery Master Agreement with the BC Ministry of Health included the establishment of a new home birth supplies, medications and data collection program. The objectives of the program include:

- standardized process to access supplies, medication, equipment and reprocessing services
- cost efficiencies due to bulk ordering of supplies
- sterilization of instruments that meet provincial standards
- provision of more timely and accurate home birth data for Health Authority (HA) and provincial planning purposes

The HBSP can be accessed by all care providers attending home births in B.C. and is financed by the health authorities from their existing operating budgets.

1.2 HBSP Advisory Committee (the Committee)

The Committee was established after the launch of the HBSP. The committee's responsibilities include the evaluation of the HSBP to determine if it meets the needs of care providers, home birth clients and health authorities. It is also responsible for approving revisions to the HBSP catalogue and ensuring supplies and medications available are consistent with provincial and HA standards and regulations.

The committee members include:

- Chair – Perinatal Services BC (PSBC) representative;
- MABC Representative;
- Clinical Operations Lead from each HA;
- Midwifery Lead from each HA;
- Representatives from:
 - Provincial Reprocessing Working Group
 - Midwives Association of BC (MABC)
 - PSBC Data Management and Surveillance
 - BC College of Nurses and Midwives (BCCNM)
 - General Practices Service Committee (GPSC)

1.3 Definitions

Care provider –

- i. a general, temporary or conditional registrant of the BC College of Nurses and Midwives whose membership is in good standing with the BC College of Nurses and Midwives; or
- ii. a registrant with the College of Physicians and Surgeons of BC whose membership is in good standing with the College of Physicians and Surgeons of BC; and
- iii. holds provisional, active or temporary new graduate privileges (where such privileges exist)

HBSP agreement – An agreement between the care provider and the HA related to responsibilities as outlined in the HBSP procedure manual and in HBSP policy, where such policy is in place. This agreement must be signed by the care provider participating in the HBSP and the HBSP HA lead or the HBSP site lead associated with the care provider's primary hospital site.

HBSP HA lead – The person responsible for the administration of the HBSP for a HA. The administrative functions of the HBSP HA lead may be designated within a HA to a HBSP site lead.

HBSP HA midwifery lead – the midwife designated in a HA to represent the midwives of that HA and to support the HBSP HA and HBSP site leads with the administrative functions of the HBSP.

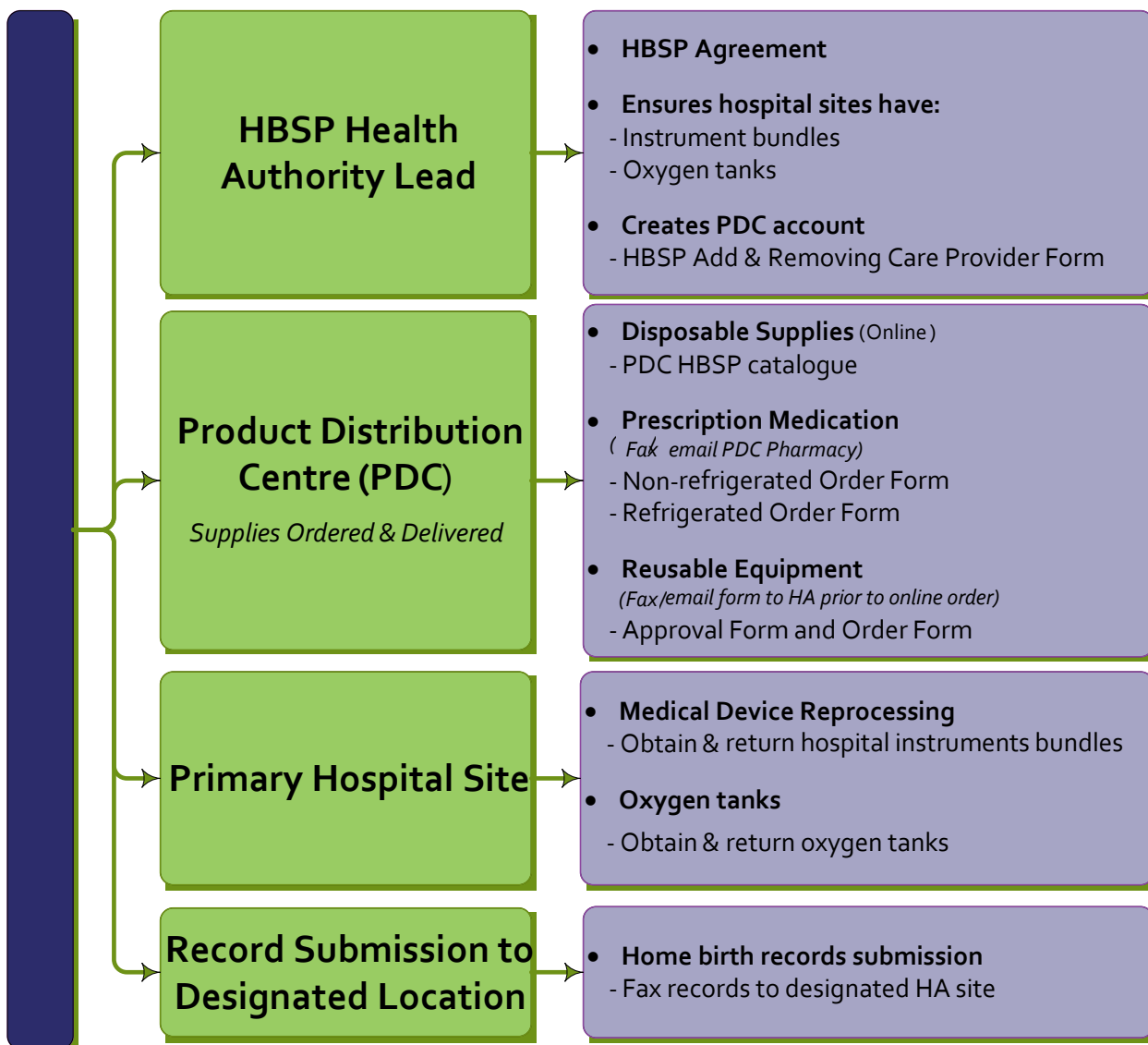
HBSP procedure manual – Details the procedures of the HBSP and includes associated forms, algorithms and FAQs (previously called the Overview Document).

HBSP policy – Policy document outlining the responsibilities (under the HBSP) of the care provider and the HA where such a policy is in place.

HBSP site lead – The person associated with a primary hospital site who assumes administrative functions of the HBSP and works in collaboration with the HBSP HA lead. Not all primary hospital sites have a HBSP site lead.

Primary hospital site – The hospital at which the care provider holds privileges and where the majority of their clients, who are planning a home birth, are registered.

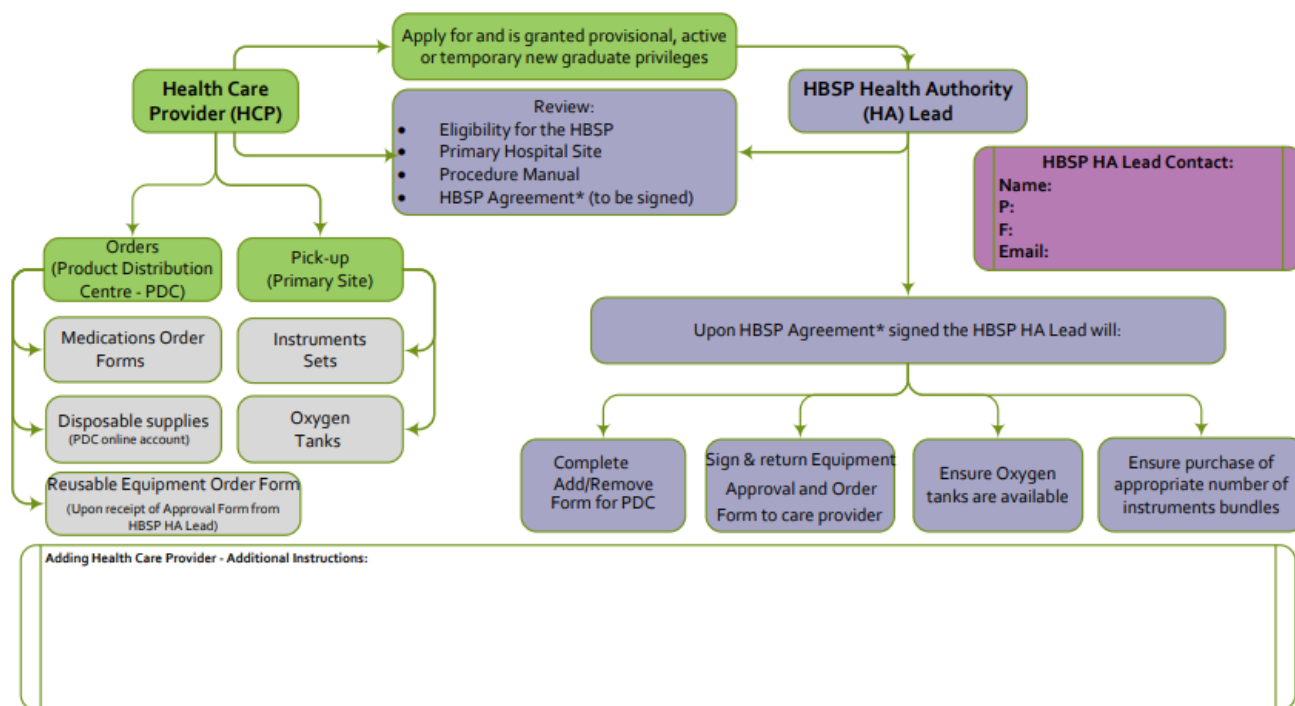
2. Program Components: Schematic Overview



3. Procedure for Adding Care Providers

All maternity care providers with provisional and active privileges in a B.C. HA who offer home birth services can register with the HBSP. Providers with locum and temporary privileges (with the exception of those using temporary new graduate privileges where such privileges exist) CANNOT have an account with the HBSP and are required to use the reusable equipment of the host care provider. Locums may order disposable supplies and medications under their host care provider.

Home Birth Supplies Program (HBSP) Adding Health Care Provider



* Previously called Policy Statement

Home Birth Supplies Program: Adding Care Provider Algorithm
Issued: May 2021

3.1 Notification of eligibility for HBSP

Each hospital's credentialing office will provide newly privileged care providers eligible for the HBSP with a letter stating their eligibility, information on enrollment and contact information of the HBSP HA leads. If a care provider does not receive this information upon credentialing, they will contact the HBSP HA lead associated with their primary hospital site directly.

Appendix A: [Home Birth Supplies Program Contact Information](#)

Appendix M: [Introduction to HBSP Letter for Care Provider](#)

3.2 HBSP Policy and Agreement Documents

All care providers in B.C. initially joining the HBSP or moving to a new primary hospital site are required to review the HBSP policy, where such a policy is in place, and review and submit a signed [HBSP Agreement](#) - previously policy statement (Appendix N) document to the HBSP HA or site lead associated with their primary hospital site. The procedure manual (previously called the overview document) provides procedural information.

3.3 Care Provider Access to Instrument Bundles and Oxygen Tanks

The HBSP HA or site lead will advise the care provider as to the process for picking up and dropping off instrument bundles and oxygen tanks.

Usage and subsequent reprocessing of the hospital instrument sets provided by the primary hospital sites is strongly encouraged. Only in rare and exceptional circumstances should a care provider not use the [Hospital instrument sets](#) and the subsequent reprocessing services. Care providers who do not wish to use the hospital instrument sets, must ensure compliance with relevant college standards on infection prevention and control, and speak with the HBSP HA or site lead for their primary hospital site. They may be asked to sign a [Hospital Instrument Set Waiver](#) (Appendix I).

3.4 Creating a new PDC Account

Once the HBSP agreement has been signed by the care provider and the HBSP HA or site lead, the HBSP HA or site lead will complete and submit the [Add/Remove Care Provider form](#) to the Product Distribution Centre (PDC) by fax/e-mail. The care provider's primary hospital site is used to determine the cost center associated with the account. If a care provider changes primary sites within a HA, they must note this change to the HBSP HA or site lead who will re-submit this form to the PDC by fax/e-mail.

3.5 Submitting Home Birth Records

It is the responsibility of the care provider to ensure that all home birth records are submitted as per policy.

[British Columbia College of Nurses and Midwives Policy on Midwifery Data Submission](#)

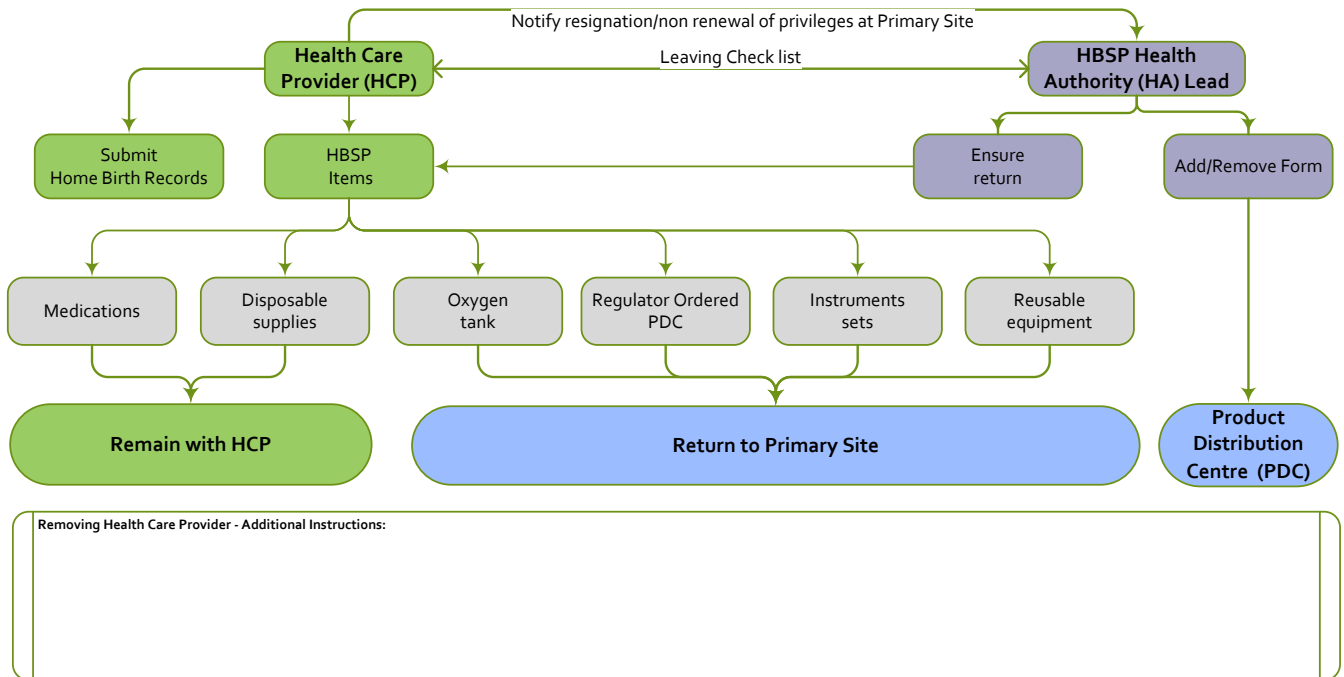
Appendix J: [HBSP Records Submission FAQ](#)

This FAQ document includes contact information for each HA related to records submission and the cover letter to be used with record submission.

4. Procedure for Removing a Care Provider

Upon notification to the HA privileging representative of their intention to resign or not renew their privileges at their primary hospital site or HA, the care provider will notify the HBSP HA or site lead. The HBSP HA or site lead will provide the care provider with the [HBSP Leaving Checklist](#) (Appendix L). The leaving checklist must be completed by the care provider and then submitted to the HBSP HA or site lead.

Home Birth Supplies Program (HBSP) Removing Health Care Provider



Home Birth Supplies Program: Removing Care Provider Algorithm
Issued: May 2019

4.1 Reusable Equipment

If a care provider leaves ([Leaving Checklist](#) – Appendix L) the HA or stops practicing, all reusable equipment must be returned to the HA. Reusable equipment is the property of the HA. Each primary site or HA will determine a process for receiving returned reusable equipment, for storing this equipment and for redistributing it when requests are submitted via the [Reusable Equipment Approval Form](#) (Appendix D). See the [Leaving Checklist](#) (Appendix L) for a list of items that must be returned.

4.2 Disposable Supplies and Medications

Disposable supplies and medications will remain with the care provider.

4.3 Instrument Bundles and Oxygen Tanks

The care provider will return all instrument bundles and oxygen tanks to their primary site.

4.4 Home Birth Records

It is the responsibility of the care provider to ensure that all home birth records are submitted as per policy.

Appendix J: [HBSP Records Submission FAQ](#)

4.5 Product Distribution Centre (PDC)

Once the HBSP leaving checklist has been completed and signed off by the HBSP HA or site lead, the HBSP HA or site lead will submit an [Add/Remove Care Provider Form](#) by fax/email to the PDC.

5. Product Distribution Centre (PDC)

The PDC is a Health Canada licensed full-service inventory management and distribution facility established by the B.C. Government for use by governmental agencies.

The facility includes a dispensing pharmacy and a 50,000 square foot warehouse that supplies and ships various health and safety related products. Major PDC programs include Home Care programs and the BC Ambulance Service.

PDC is the most cost-effective and comprehensive option available currently and it integrates well with the HBSP and HAs' invoicing and payment systems. Accessing disposable supplies through the hospitals is not feasible due to logistical and administrative challenges.

The PDC sends monthly summary reports and invoices of all home birth orders to the HA for monitoring and payment. The HBSP Advisory Committee is responsible for approving any changes to the PDC's HBSP catalogue including additional supplies, medications or equipment.

Please see the following link for the guide on how to access and order from the PDC:

[Accessing and ordering from the PDC](#)

Product Distribution Centre (PDC)

If you have questions about your order, please contact Customer Service:

Phone: 604-927-2000
Fax: 604-927-2025
Email: PDCCustomerSer@gov.bc.ca

Product Distribution Centre
2370 United Blvd
Coquitlam, BC V3K 6A3

5.1 Disposable Supplies

A PDC account number will be provided by the PDC to all registered home birth care providers via e-mail. This account number and postal code are required to log online to the PDC's HBSP specific shopping cart www.pdc.gov.bc.ca/Account/LogOn.

The “ship to” address that was initially provided to the PDC is linked to the care provider and cannot be changed online. Contact PDC customer service directly to change the “ship to” address. This must be done PRIOR to submitting an order online. Once contacted, the PDC requires 24–48 hours to change the shipping address.

Disposable supplies and non-prescription medication for HOME BIRTH USE ONLY can be ordered via the PDC online platform. If there is evidence that supplies are being ordered for care provided in a clinic setting, it may result in suspension or cancellation of the PDC account.

The quantity measures for each supply vary considerably. Some items come in single quantities, while other items come in boxes of various quantities (i.e. 4, 10, 100). Please check the quantity stated on the shopping cart carefully prior to ordering. PDC policy states that anything ordered in error by the care provider CANNOT be returned. If there has been an error in ordering the supplies, and it has not yet been shipped, call the PDC help desk at: 604-927-2000.

In the event of a shortage of specific supplies, the PDC will work with the HAs and the HBSP Advisory Committee designated point person to:

- manage inventory and avoid disruptions to the HBSP
- identify and source suitable alternatives

If there are no suitable alternatives or if the budget is impacted, the HBSP Advisory Committee will make all final decisions regarding shortages from the inventory management system.

The HBSP HA or site lead will communicate to care providers the importance to reduce orders and outline a specific process for allocation until the supply issue is resolved.

5.2 Prescription Medication

All prescription medications required for home births are available through the PDC pharmacy. Completed order sheets must be faxed/e-mailed to the PDC. Refrigerated prescription medication requires maintenance of a cold chain throughout delivery; consequently, a different prescription order sheet is needed for refrigerated medication.

Order forms can be accessed via the home page of the care provider’s PDC account. care providers are required to ensure they are using the most current order forms.

The PDC pharmacy follows industry guidelines with respect to drug expiry dates. Medication that will expire within one month of delivery will NOT be shipped. The PDC aims to provide medication with a minimum 3-month lifespan. It is not possible to request medication with an extended life. Please order medication estimated for use over a 4-8 week period and do not stockpile medication.

5.3 Reusable Equipment

The intent of the HBSP is not to replace all of the reusable equipment in every provider's home birth kit at one time, but to replace them on an as needed basis. The anticipated lifespan of reusable equipment is five years. Ordering reusable equipment requires prior approval by the HBSP HA or site lead for the care provider's primary site.

Except in extenuating circumstances, equipment will not be replaced if the previous piece of equipment was purchased within the last five years. If the home birth equipment is in good working order, it should be used for the entire duration of its lifespan. The home birth equipment is the property of the HA and it is expected that the care provider maintains, stores and uses it in an appropriate manner.

- **Theft or loss of equipment:** If the equipment is lost or stolen, the care provider must go through their Commercial General Liability (CGL) insurance for replacement. HA's must be reimbursed for the cost of the equipment. Contact the HBSP HA or site lead to arrange. Approval for repurchasing from the PDC will be the responsibility of the HBSP HA or site lead.
- **Defective/Broken equipment:** If the equipment is defective/broken, it is the responsibility of the care provider to contact PDC customer support for warranty information.
- **Recall of equipment:** If the equipment is recalled for safety, it is the responsibility of the care provider to comply with the recall in a timely manner (see Section 5.4).

To order new or replacement equipment: Care providers must complete two forms to be able to order reusable equipment. The first form is the HBSP Reusable Equipment Approval Form and the second is the PDC Order Form for Reusable Equipment. Complete the two order forms, including any required order justification and documentation (insurance claim etc.). Send them both via fax/e-mail to the [HBSP HA or site lead](#) (Appendix A) representing the HBSP primary hospital site of the care provider. After review and completion, the HBSP HA or site lead will notify the care provider of approval/denial for ordering and provide the care provider with copies of the signed forms. Once these forms have been sent back to the care provider, the provider can proceed with ordering the reusable equipment by faxing the signed PDC order Form for Reusable Equipment, following the directions on the form. The PDC only requires the PDC Order Form for Reusable Equipment to be sent to them. Once they receive a signed order form from a care provider, they will fulfill the order and ship it.

Appendix D: [Reusable Equipment Approval Form](#) AND

Appendix O: [PDC Order Form for Reusable Equipment](#)

5.4 Recalls of Supplies or Equipment

Care providers are responsible for responding to all recalls initiated by suppliers of the PDC in a timely manner. Failure to respond appropriately will result in suspension or cancellation of the PDC account. The process to follow for recalls is as follows:

- Recall letters are issued by the PDC to the specific account holders affected by the recall. The reply form should be completed and returned to the PDC from the specific account holder who received the letter (not other practice partners/office managers).
- The account holder must enter the name, account number and the amount of affected product that needs to be returned. If there are other care providers who have received the affected product but have not received a recall letter, contact the PDC - do not add their names to the reply form.
- The reply letter should be completed in full and returned as soon as possible to the PDC by e-mail to PDC.Recalls@gov.bc.ca.
- Reply letters that are not completed properly may not be counted in the recall, resulting in an elevated risk to the care provider's clients.

The PDC will provide each HBSP HA lead with a list of the affected care providers in their HA and the HBSP HA or site lead will assist with communicating the recall protocol to affected midwives.

Appendix K: [PDC FAQ](#)

6. Instruments and Reprocessing

All hospitals where registered midwives hold admitting privileges participate in the HBSP. If there is a hospital where physicians are providing home birth services but midwives are not members of the medical staff, please contact the perinatal lead for the health authority for more information.

6.1 Hospital Instrument Sets

Home birth instruments are supplied and reprocessed to care providers through the Medical Device Reprocessing Department (MDRD) from their primary hospital site.

It is the responsibility of the HBSP HA or site lead to ensure there is an adequate number of instrument sets ordered for the care providers who have designated their hospital as their primary site.

All hospital instrument sets are the property of the health authority. Instruments come in four distinct instrument bundles:

- Birth set (+ Episiotomy scissors for some HAs)
- Suturing set
- Umbilical Vein Catheterization (UVC) set
- Episiotomy scissors package (note: some HA's include this instrument in the birth set)

Each care provider is allocated 2 birth bundles, 2 suture bundles, 1 episiotomy package, and 1 UVC bundle.

Appendix F: [Instrument Reprocessing FAQ](#)

Care providers must return their used hospital instrument bundles to their primary hospital site for reprocessing. Upon returning instruments to the hospital site for processing, they will be supplied with an adequate number of bundles to cover their home birth requirements. Care providers must follow the procedure for dropping off and picking up bundles as determined by their primary hospital site.

Appendix G: [Reprocessing Checklist Sample](#)

6.2 Medical Device Reprocessing Services

The Medical Device Reprocessing Departments (MDRD) at each of the primary hospital sites will sterilize and repackage the hospital instrument sets between uses. The process of obtaining and returning sets will be unique to each MDRD of the primary hospital. Contact the HBSP HA lead to determine who to contact within each HA.

The MDRD follows strict guidelines for the safe handling and processing of all medical devices.

Hospitals are not expected to provide reprocessing services for care providers' personally owned equipment. If care providers and hospitals have a pre-existing arrangement for reprocessing independently owned equipment, these arrangements must be discussed separately outside of the HBSP.

Care providers are strongly encouraged NOT to reprocess their personally owned home birth equipment but to use the hospital instrument sets. A goal of the HBSP is to ensure adherence to provincial reprocessing and infection control standards.

If a care provider declines to use the HBSP instrument bundles and primary hospital site reprocessing, they must sign the [Hospital Instrument Sets Waiver](#) (Appendix I).

Appendix F: [Instrument Reprocessing FAQ](#)

Appendix H – [Recommended Best Practices for Transporting Home Birthing Equipment and Biological Materials](#)

7. Oxygen Tanks and Refilling

Oxygen tanks will be supplied by the vendors that supply compressed gases for each HA. They will be picked up and dropped off by care providers at their primary hospital site.

The tanks provided are standardized size D tanks (i.e. size 3) and are filled and refilled with medical grade oxygen. Each care provider should have access to two full tanks at any one time. Care providers must return the tanks to their primary hospital for exchange.

Each hospital advises its care providers where to pick up and drop off oxygen tanks and how to exchange them for an empty tank. Most sites have a specific storage area where tanks for the HBSP are kept and accessed by care providers.

Note that care providers can use their existing regulators if they are in good working order and fit a size D tank. When a regulator needs to be replaced it must be approved and ordered via the PDC (see Section 5.3). Care providers cannot refill their personally owned oxygen tanks through the HBSP.

8. Data Collection

Home birth data is abstracted and coded by coders from designated coding sites from each HA. This data set is then submitted to Perinatal Services BC at the end of each hospital's reporting period or quarter. The collection of home birth and hospital birth data are now integrated in each HA's data set. Direct and timely data collection for home births allows for the efficient administration of the HBSP and regional planning within the HA.

Home birth records must be submitted to the HA's designated coding site within 30 days of the home birth. Records submitted more than 60 days after the home birth will not be abstracted and coded. The perinatal forms to submit for each record are as follows:

- Home Birth Records Submission – Client Cover Sheet (see link below)
- BC Antenatal Records (Parts 1 & 2)
- BC Newborn Record (Parts 1 & 2)
- BC Labour and Birth Summary
- BC Labour Partogram

Home birth records submitted to the HA are used for data collection purposes only and are archived for two years prior to being destroyed as per hospital guidelines and standards. Existing provincial privacy legislation prevents any care provider, administrator or hospital staff from accessing submitted home birth records for any reason other than data collection purposes into the BC Perinatal Data Registry.

For frequently asked questions on home birth records submission, including HA specific contact information, please refer to:

Appendix J: [Home Birth Records Submission FAQs](#)

The BC College of Nurses and Midwives (BCCNM) [Policy on Medical Records](#) stipulates that midwives must make copies of medical records available to Perinatal Services BC (PSBC) (specifically, the

standard perinatal forms) following a home birth for the purposes of perinatal data collection and analysis to the BC Perinatal Data Registry or alternate agency designated by BCCNM.

9. List of Appendices

- Appendix A:** Home Birth Supplies Program Contact Information ([HBSP-HA Contact](#))
- Appendix B:** PDC - List of Disposable Equipment (due to frequent changes a list is no longer available. Please log in to the PDC shopping cart to view the available disposable items)
- Appendix C:** PDC - List of Reusable Equipment ([List of Reusable Equipment](#))
- Appendix D:** Reusable Equipment Approval Order Form ([Approval Form](#))
- Appendix E:** PDC - List of Medications ([Medication List](#))
- Appendix F:** Instrument Reprocessing FAQ ([Instrument Reprocessing FAQ](#))
- Appendix G:** Reprocessing Checklist Sample ([Reprocessing Checklist Sample](#))
- Appendix H:** Recommended Best Practices for Transporting Home Birthing Equipment and Biological Materials ([Transporting Equipment](#))
- Appendix I:** Hospital Instrument Set Waiver ([Set Waiver](#))
- Appendix J:** Home Birth Record Submission FAQ ([Record Submission FAQ](#)) and [Home Birth Record Submission Cover Sheet](#)
- Appendix K:** PDC FAQ ([PDC FAQ](#))
- Appendix L:** HBSP Leaving Checklist ([Leaving Checklist](#))
- Appendix M:** Introduction to HBSP Letter for Care Provider ([Intro Letter Care Provider](#))
- Appendix N:** HBSP Agreement - Previously Policy Statement ([HBSP Agreement Form](#))
- Appendix O:** PDC Order Form for Reusable Equipment ([PDC Order Form](#))

Appendix A: Home Birth Supplies Program (HBSP) - Contact Information

Due to frequent changes, please visit [Perinatal Services BC – Home Birth Supplies Program website](#) to find the health authority lead and midwifery lead contact information.

Appendix B: PDC - List of Disposable Equipment

Due to frequent changes a list is no longer available. Please log in to the [PDC shopping cart](#) to view the available disposable items.

Appendix C: PDC - List of Reusable Equipment

PDC NUMBER	ITEM NAME
6515871476	CHARGER/ADAPTER AC/DC DEVILBISS EA - not required if ordering new Devilbiss suction pump
6680990091	CHARGER/ADAPTER AC/DC LAERDAL COMP SUCT - required only for existing Laerdal suction pumps
6515871477	CORD POWER AC 7314P-613 DEVILBISS CHARGE - not required if ordering new Devilbiss suction pump
6515110800	DOPPLER FETAL AUD 2MHZ PROBE HUNT LG 1/BX
6515110090	CARRYING CASE FOR HUNT LG DOPPLERS 1EA – to be ordered with new Doppler only
6515508383	HEADLAMP LED 2075 LUMENS DUAL COAST
6515110198	OXIMETER PULSE DIGITAL EDAN EA
6515508597	OXIMETRY NEONATAL WRAP SENSOR REUSE EA
6515508639	PAD HEATING DIGITAL 12" X 24" BIOS EACH
6515515007	REGULATOR OXY CP FOR SIZE "D" O2 TANK EA
6515160174	SPHYGMOMANOMETER KIT ADLT DURASHOCK
6515160182	SPHYGMOMANOMETER CUFF RUSE LG ADLT
6515160189	SPHYGMOMANOMETER CUFF RUSE SM ADLT
6515990001	SPHYGMOMANOMETER INFLATION BULB WA – for replacement
6515160118	STETHOSCOPE DUAL HEAD LITTMANN BLK EA
6515508398	STETHOSCOPE FETAL 22" ALMEDIC EA
6515110153	STETHOSCOPE INFANT LITTMANN CLASSIC EA
6515872083	SUCTION UNIT W/800ML CANIST DEVILBIS KIT
6515515013	THERMOMETER DIGITAL SURETEMP W/A EA

*For more product details please search using product PDC code in the View Full Catalogue section on [PDC Shopping Cart](#)

Appendix D: Reusable Equipment Approval Order Form

All reusable equipment obtained through the HBSP is the property of the health authorities and is loaned to care providers. Care providers **must return** all equipment obtained through the HBSP when they leave a primary hospital. The expected life span for a piece of reusable equipment is five years. Except in extraordinary circumstances, the equipment on this list may only be ordered once every five years. Please complete this form in conjunction with the [PDC Reusable Equipment Order Form](#) to order reusable equipment.

Instructions:

- Put a check mark beside the item(s) being ordered.
- If the item(s) has been previously ordered from the PDC, indicate the previous order date.
- If the previous order date is within five years, check box and complete *Order Justification* section.
- Complete the [PDC Reusable Equipment Order Form](#)
- Submit this Approval Form and the PDC Order Form to your HBSP HA lead for approval and signature.
- Completed forms should be emailed or faxed back to the care provider.
- Care provider will then follow instructions on forms: a) pick up equipment b) place PDC order c) order not approved.
- For approved and signed PDC orders – submit PDC ORDER FORM (p3-4) to the PDC

Care Provider Name		
Care Provider Signature		
PDC Customer Number		Date:
HBSP HA Lead Name		
HBSP HA Lead Signature		Date:

Check ✓ to order*	PDC Code	Description	Previous Order Date	Within 5 years ✓
	6515871476	CHARGER/ADAPTER AC/DC DEVILBISS EA - not required if ordering new Devilbiss suction pump		
	6680990091	CHARGER/ADAPTER AC/DC LAERDAL COMP SUCT – required only for existing Laerdal suction pumps		
	6515871477	CORD POWER AC 7314P-613 DEVILBISS CHARGE - not required if ordering new Devilbiss suction pump		
	6515110800	DOPPLER FETAL AUD 2MHZ PROBE HUNTLG 1/BX		
	6515110090	CARRYING CASE FOR HUNTLG DOPPLERS 1EA – to be ordered with new Doppler only		
	6515508383	HEADLAMP LED 2075 LUMENS DUAL COAST		
	6515110198	OXIMETER PULSE DIGITAL EDAN EA		
	6515508597	OXIMETRY NEONATAL WRAP SENSOR REUSE EA		
	6515508639	PAD HEATING DIGITAL 12" X 24" BIOS EACH		
	6515515007	REGULATOR OXY CP FOR SIZE "D" O2 TANK EA		

	6515160174	SPHYGMOMANOMETER KIT ADLT DURASHOCK		
	6515160182	SPHYGMOMANOMETER CUFF RUSE LG ADLT		
	6515160189	SPHYGMOMANOMETER CUFF RUSE SM ADLT		
	6515990001	SPHYGMOMANOMETER INFLATION BULB WA – for replacement		
	6515160118	STETHOSCOPE DUAL HEAD LITTMANN BLK EA		
	6515508398	STETHOSCOPE FETAL 22" ALMEDIC EA		
	6515110153	STETHOSCOPE INFANT LITTMAN CLASSIC EA		
	6515872083	SUCTION UNIT W/800ML CANIST DEVILBIS KIT		
	6515515013	THERMOMETER DIGITAL SURETEMP W/A EA		

*Only single pieces of equipment can be ordered at one time. Eg. one suction pump and one dopplex can be ordered at one time, but not two suction pumps.

Home Birth Supplies Program

Reusable Equipment – Order Justification

Please complete this portion of the form *if a piece of equipment listed is being re-ordered within 5 years*. For each item listed, please provide rationale (eg. item stolen or broken). If an insurance claim or warranty claim has been made, please provide documentation (if available).

	Item (PDC Code)	Rationale for Re-Order (completed by care provider)	Approval (completed by HA)		
			PDC order	Storage*	Not approved
#1					
#2					
#3					
#4					
#5					

*HAs will have reusable equipment returned by other care providers in storage. If the order is approved the HA may elect that the care provider orders a new item from the PDC or that they get the item from HA HBSP storage. Instructions to be provided by HBSP HA lead.

	HA HBSP Lead Comments or Further Instructions
#1	
#2	
#3	
#4	
#5	

Original: HBSP HA lead Copy: care provider

Appendix E: List of Medication (Prescription)

PDC NUMBER	ITEM NAME
Non-Refrigerated Prescriptions	
6505037003	CARBETOCIN INJ 100MCG/ML DURATOCIN 1ML VI
6515110100	CEFAZOLIN SOD INJ STERIMAX 1G/VIAL
6505660507	CLINDAMYCIN INJ 150MG/ML SDZ 6ML/VIAL Note: Clindamycin comes in a 6ml vial. Please be careful when ordering quantity
6505037460	DIMENHYDRINATE INJ 50MG/ML TELIG 1ML/AMP – sub is 6505031674
6505061635	DIMENHYDRINATE INJ 50MG/ML SNDZ 1ML/VI
6505061809	EPINEPHRINE INJ 1MG/ML TELIGENT 1ML/AMP – sub is 6505061814
6505162303	EPINEPHRINE SYR 20G 1MG/10ML LIFESH 10ML
6505062315	EYE OINT ERYTHROMYCIN 3.5G PHARMA EA
6515110151	LIDOCAINE HCL INJ 1% 10MG/ML 10ML AMP
6515110150	LIDOCAINE HCL INJ 2% 20MG/ML 10ML AMP
6505035109	LIDOCAINE HCL JELLY SYR 2% XYL 10ML 1/PK
6505061040	MISOPROSTOL TAB 200MCG 100 Pills/Bottle Note: Misoprostol is only available in bottles. Each bottle contains 100 tablets. Please be careful when ordering quantity.
6505061621	NALOXONE HCL INJ 0.4MG/ML SNDZ 1ML/AMP
6505066011	NAPROXEN TAB 250MG APOTEX 100/BO Note: Naproxen is only available in bottles. Each bottle contains 100 tablets. Please be careful when ordering quantity.
6505066121	NITROGLYCERIN SPRAY 0.4MG 75 DOS EA CNCM
6515110160	OXYTOCIN INJ 10USP/ML KABI 1ML/VIAL
6505061408	PENICILLIN G SOD INJ 5MIU/VIAL
6505168316	SODIUM CHL INJ 0.9% 100ML MINIBAG 4/PK
6505168311	SODIUM CHL INJ 0.9% 50ML MINIBAG 4/PK
6515508633	SODIUM CHL INJ 0.9% BAXTER 1000ML/BAG
6505174328	SODIUM CHL SYR 0.9% PRAXIJET 20ML EA
6505174331	SODIUM CHL IV FLUSH SYR 0.9% BD 10ML EA
6505440046	TRANEXAMIC ACID INJ 100MG/ML SDZ 10ML/VI
6515508646	VITAMIN K1 INJ 10MG/ML 1ML AMP EA
6505169120	WATER INJ STER TELI 10ML POLYAMP EACH
Refrigerated Prescriptions	
No code	ERGONOVINE IM: 0.25MG PER ML 1ML VIAL - STOCK USE
No code	HEMABATE IM: 0.25MG = 250MCG PER 1ML VIAL – STOCK USE

Appendix F: Instrument Reprocessing - Frequently Asked Questions (FAQ)

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WHAT ARE HOSPITAL INSTRUMENT SETS

1. What are hospital instrument sets?

Hospital instrument sets (also previously referred to as hospital equipment bundles) contain instruments that have been purchased, and are therefore owned, by the health authorities. The health authorities have agreed to loan this instrumentation to care providers attending home births and reprocess it following a home birth. This instrumentation can be safely reprocessed according to provincial policies at the primary hospital sites.

2. How many hospital instrument sets are there?

There are four hospital instrument sets:

- Birth set;
- Suturing set;
- UVC set; and
- Episiotomy scissors package*

* Some health authorities included this instrument in the birth set

3. What instrumentation is in each of the sets?

The instruments in the hospital instrument sets may or may not be used during a home birth but are required, as per the CMBC to be carried by midwives when attending a home birth.

Birthing set	Quantity of instruments per set	Description
Scissors (curved)	1	6 3/4" mayo scissors (curved)
Hemostatic forceps (curved)	2	8" Rochester-pean forceps (curved)
UVC Set		
Tissue forceps	1	5 3/4" Tissue forceps
Scissors	1	5 3/4" Metzenbaum scissors
Mosquito forceps	1	5" Mosquito forceps (straight)
Probe	1	6" P-604_ALMEDIC
Needle holder	1	5 1/2" Halsey needle holder
Suture Set		
Dressing forceps	1	5 3/4" Dressing forceps
Tissue Forceps	1	5 3/4" Tissue forceps
Sponge forceps (aka - Ring) (straight)	1	9 1/2" Sponge forceps (straight)
Scissors (straight)	1	6 3/4" Mayo scissors (straight)
Needle holder	1	7" Crile wood needle holder
Episiotomy scissors package* *Some health authorities have included this item in the birth Set		
Episiotomy scissors	1	5 1/2" Braun episiotomy scissors, angled, blunt/blunt

WHAT EQUIPMENT IS STERILIZED

4. What equipment needs sterilization?

If the hospital instrument set is opened, the instruments within will need to be reprocessed, even if not used during a home birth. If a hospital instrument set has not been opened and the sterility and package integrity is still intact, the sterile set does not need to be returned for reprocessing.

5. What if I need equipment that is not in the Hospital instrument sets to be sterilized?

If you require other instruments/equipment to be *sterilized*, you will need to make separate arrangements outside of the Home Birth Supplies Program. If other arrangements are being made for the sterilization of other instruments/equipment, the full reprocessing cycle needs to adhere to the BC Ministry of Health provincial policies outlined in the document [Best Practice Guidelines for Cleaning, Disinfection, and Sterilization of Critical and Semi-critical Medical Devices in BC Health Authorities.](#)

The *cleaning and disinfecting* of personal equipment or reusable equipment ordered through the Product Distribution Center is the responsibility of the individual care provider. E.g. Stethoscope

6. Will the primary hospital sites reprocess other equipment?

If historic arrangements had been made and the primary hospital site agrees, reprocessing services of other office instruments/equipment for care providers may continue. This agreement will remain outside of the Home Birth Supplies Program.

HOW DO I LOOK AFTER THE INSTRUMENTATION IN THE HOSPITAL INSTRUMENT SETS

7. Why do I have to look after instruments in the hospital instrument sets if it is not my own personal instrumentation?

In order to ensure the ongoing availability of the hospital instrument sets and their reprocessing as an integral part of the Home Birth Supplies Program, pre-cleaning, maintenance and care of the instrumentation is essential.

8. Where do I pick up/ drop off the hospital instrument sets?

Each primary hospital site has made arrangements for care providers to pick up sterile and drop off soiled hospital instrument sets. Please contact your manager, midwifery lead or site contact for details.

9. How do I transport the sterile hospital instrument sets?

Sterile hospital instrument sets need to be handled carefully as to maintain sterility and package integrity. Sterile and clean instruments/equipment **MUST NOT** be transported in the same package, bag or container as soiled instruments/equipment. There should be an avoidance of temperature and humidity extremes as well as large fluctuations. (ie. Do not store sterile hospital instrument sets in vehicles)

Some health authorities have provided transport containers for the transport of the hospital instrument sets. If your health authority has not provided a transport container, the container provided by you should be durable, made of easily cleanable surfaces, waterproof and have a tight-fitting lid with the ability to be securely fastened/closed.

Please note: Health authorities may also have local policies or clinical practices with additional requirements that must be followed.

10. I have used some (or all) of the instruments in one (or more) of the hospital instrument sets. What should I do now?

Used instruments **MUST** be pre-cleaned prior to returning to the primary hospital site for reprocessing. Immediately after use, instruments must be cleaned of blood, fluids and tissue by rinsing with water. Do not use saline for this purpose. This instrumentation is then put into a transport container that does not contain sterile or clean instruments/equipment and returned in a timely fashion to the primary hospital site for reprocessing. The container containing the soiled instrumentation should be labeled with a Biohazard sticker which can be ordered through the Product Distribution Center. The transport container should be thoroughly cleaned and disinfected after each use. A clean instrument set can be collected from the MDR in exchange for the set handed in.

Please note: Health authorities may also have local policies or clinical practices with additional requirements that must be followed.

11. I opened a hospital instrument set, but did not use all the instruments inside. Do I have to return those instruments I did not use?

Once a hospital instrument set has been opened, all instruments in the set need to be returned to the primary hospital site for reprocessing, regardless if the instrument was used or not.

WHAT ELSE WILL BE HANDLED BY THE REPROCESSING DEPARTMENT AT MY PRIMARY HOSPITAL SITE

12. Can I return sharps (e.g. needles, scalpels) to the reprocessing department?

No. All sharps should be discarded in a standard sharps container which can be ordered through the Product Distribution Center. Full sharps containers should be disposed of in your usual manner.

13. Can placentas be disposed of by the reprocessing department?

No. If a placenta needs to be transported to the primary hospital site for pathological studies, it should be transported **directly** to the lab (ensure pre-arrangements have been made). The placenta **should not be** transported in the same transport container as the soiled instruments from the hospital instrument sets. It should be transported in its own separate transport container and labeled with a Biohazard sticker. Both the container and the Biohazard stickers can be ordered through the Product Distribution Center.

GENERAL QUESTION

14. I have my own personal instrumentation which is similar or the same as that in the hospital instrument sets. Can I continue to use my own instrumentation instead of the instrumentation in hospital instrument sets?

Usage and subsequent reprocessing of the hospital instrument sets provided by the primary hospital sites is strongly encouraged. The instrumentation and sterilization services are being made available to care providers attending home births at no cost.

Only in rare and exceptional circumstances should a care provider not use the hospital instrument sets and the subsequent reprocessing services. If you do not wish to use the hospital instrument sets, please talk to your primary hospital site contact. You may be asked to sign a waiver.

Please note: If using your own personal instrumentation and it requires sterilization following a home birth, primary hospital sites may choose not to sterilize personal instrumentation. If the sterilization is privately arranged, it must adhere to the BC Ministry of Health provincial policies outlined in the document [Best Practice Guidelines for Cleaning, Disinfection, and Sterilization of Critical and Semi-critical Medical Devices in BC Health Authorities](#).

Appendix G: Instrument Reprocessing Checklist (SAMPLE)

Midwife name: _____ Contact number/email: _____

Instrument sets dropped off:

Instrument	Description	Number/set	Number of sets dropped off	Notes
<i>Birth set</i>				
Scissors (curved)	6 ¾" Mayo scissors (curved)	1		
Hemostatic forceps (curved)	8" Rochester-pean forceps (curved)	2		
<i>UVC set</i>				
Tissue forceps	5 ¾" Tissue forceps	1		
Scissors	5 ¾" Metzenbaum scissors	1		
Mosquito forceps	5" Mosquito forceps (straight)	1		
Probe	6" P-604 ALMEDIC	1		
Needle holder	5 ½" Halsey needle holder	1		
<i>Suture set</i>				
Dressing forceps	5 ¾" Dressing forceps	1		
Tissue forceps	5 ¾" Tissue forceps	1		
Sponge forceps (aka – ring) (straight)	9 ½" Sponge forceps (straight)	1		
Scissors (straight)	6 ¾" Mayo scissors (straight)	1		
Needle holder	5 ½" Halsey needle holder	1		
<i>Episiotomy scissors package*</i>				
Episiotomy scissors	5 ½" Braun episiotomy scissors (angled, blunt/blunt)	1		

*Some health authorities have included this item in the birth set

Signature: _____ Date (dd/mm/yyyy): _____

FOR REPROCESSING USE ONLY:

Full sets: Y ☐ N ☐ Date (dd/mm/yyyy): _____

Notes: _____

Midwife name: _____ Contact number/eemail: _____

Instrument sets picked up:

Instrument	Description	Number/set	Number of sets dropped off	Notes
<i>Birth set</i>				
Scissors (curved)	6 ¾" Mayo scissors (curved)	1		
Hemostatic forceps (curved)	8" Rochester-pean forceps (curved)	2		
<i>UVC set</i>				
Tissue forceps	5 ¾" Tissue forceps	1		
Scissors	5 ¾" Metzenbaum scissors	1		
Mosquito forceps	5" Mosquito forceps (straight)	1		
Probe	6" P-604_ALMEDIC	1		
Needle holder	5 ½" Halsey needle holder	1		
<i>Suture set</i>				
Dressing forceps	5 ¾" Dressing forceps	1		
Tissue forceps	5 ¾" Tissue forceps	1		
Sponge forceps (aka – ring) (straight)	9 ½" Sponge forceps (straight)	1		
Scissors (straight)	6 ¾" Mayo scissors (straight)	1		
Needle holder	5 ½" Halsey needle holder	1		
<i>Episiotomy scissors package*</i>				
Episiotomy scissors	5 ½" Braun episiotomy scissors (angled, blunt/blunt)	1		

*Some health authorities have included this item in the birth set

Signature: _____ Date (dd/mm/yyyy): _____

Notes: _____

Appendix H: Recommended Best Practices for Transporting Home Birthing Equipment & Biological Materials - March 2016

Purpose: To summarize recommended best practices for transporting equipment and biological material associated with home births in British Columbia.

Background

- The functionality and sterility of home birth equipment cannot be maintained unless appropriate precautions are taken during transport.
- Soiled medical equipment, unsecured sharps and biological matter are significant occupational health and safety hazards that must be appropriately managed.
- In 1994, the Government of Canada passed the [*Transportation of Dangerous Goods Act*](#) (the Act) to regulate the transportation of dangerous goods. The Act sets requirements for documentation, containment, worker training and other topics relating to the transport of dangerous goods. **Please note:**
 - a) Medical waste is included under the Act in Section 2.36.1 of the regulations.
 - b) Section 5.16.2 of the regulations states, "*A person must not handle, offer for transport or transport dangerous goods that are UN3291, (BIO) MEDICAL WASTE, N.O.S. of Class 6.2, infectious substances, unless the dangerous goods are in a Type 1C means of containment that is in compliance with CGSB-43.125*".
 - c) A "Type 1C means of containment" is defined by Transport Canada as a container consisting of:
 - a UN11G intermediate bulk container tested to a Packing Group I or II performance level;
 - a UN1G fibre drum with a leak-tight liner tested to a Packing Group I or II performance level;
 - a plastic film bag in a leak-tight, rigid, plastic outer packaging; or
 - a plastic film bag in a fibreboard box.
- In 1996, the Government of British Columbia passed the [*Transport of Dangerous Goods Act*](#). Section 5 of the Act states that a person must not handle or transport dangerous goods unless:
 - a) all applicable prescribed safety requirements are complied with; and
 - b) all containers, packaging, [and] road vehicles [...] comply with the applicable prescribed safety standards and display the applicable prescribed safety marks.
- In 2007 (and again in 2011), the BC Ministry of Health issued the document *Best Practice Guidelines for Cleaning, Disinfection, and Sterilization of Critical and Semi-critical Medical Devices in BC Health Authorities (The Guidelines)* as provincial policy.
- The guidelines describe the safe handling, monitoring, assessment, transportation and cleaning/disinfection/sterilization of re-useable medical devices.

Best Practices

- The guidelines include best practices relevant to the transportation of biological matter and home birth equipment. **Please note: Health authorities may also have local policies or clinical practices with additional requirements that must be followed.**

1. Prior to Use

- a) Prior to opening, packages and/or containers used for the storage of reprocessed medical device shall be checked to ensure that tamper-proofing mechanisms have not been compromised.
- b) Prior to opening, the reprocessed medical device package shall be reviewed for the following:
 - i) Integrity of the package (e.g., clean, dry and intact)
 - ii) Change of *external* chemical indicator
 - iii) Expiry date, if applicable
- c) After opening, the reprocessed medical device package shall be reviewed for the following:
 - i) Change of *internal* chemical indicator;
 - ii) Presence of moisture or watermarks within the package
 - iii) Filter alignment in rigid containers, where applicable
 - iv) Presence of foreign debris

2. Immediately After Use

- a) "Critical" and "semi-critical" medical devices¹ owned by clients/patients cannot be reprocessed safely as sterilization and/or high-level disinfection cannot be achieved in the home environment. Therefore, critical and semi-critical medical devices shall remain single use in the home and disposed of after use.
- b) Disposable sharps such as needles and blades shall be removed from the medical device and disposed of by the user in an appropriate sharps container at the point of use.
- c) Reusable devices that are sharp or that incorporate sharp components shall be segregated to prevent injury to personnel handling and reprocessing these devices.
- d) Immediately after use, medical devices shall be cleaned of gross soil by rinsing with water. Do not use saline for this purpose. **Please note: removal of gross soil by rinsing is a mandatory step that must be completed every time.**
- e) Devices shall be sorted and contained after gross soil removal is complete.
- f) Placentas must not be transported in the same containers as soiled instruments.

¹ In Spaulding's classification system, a "critical" medical device is a device that enters normally sterile tissue or the vascular system or through which blood flows. Such devices should be sterilized, which is defined as the destruction of all microbial life. A "semi-critical" medical device that comes in contact with non-intact skin or mucous membranes but ordinarily does not penetrate them (e.g., respiratory therapy equipment; transrectal probes; specula). Reprocessing semi-critical devices involves meticulous cleaning followed by, at a minimum, high-level disinfection.

3. Device Transportation

- a) Soiled devices shall be transported in compliance with federal and provincial legislation for the transportation of dangerous goods.
- b) Soiled medical devices shall be handled in a manner that reduces the risk of exposure and/or injury to personnel and clients/patients/residents, or contamination of environmental surfaces:
 - i. Contaminated devices shall be transported in covered, fully enclosed, puncture-resistant containers that prevent spill of liquids. Lids must fit tightly to ensure contaminated contents do not leak or spill.
 - ii. Contaminated devices shall be transported to a designated decontamination area as soon as possible after use.
 - iii. On-site transport for contaminated devices shall follow designated routes to avoid high-traffic and patient-care areas.
 - iv. All carts and containers containing contaminated devices shall be so identified (i.e., labelled with a biohazard sign).
 - v. Containers shall be decontaminated after each use by the Medical Device Reprocessing Department.
 - vi. Sterile and soiled devices shall not be transported within the same container due to the risk of cross-contamination.

4. Device Drop-Off

- a. All contaminated devices shall be dropped off at the Medical Device Reprocessing Department with sufficient time to allow for cleaning and turnaround of the devices.

Appendix I: Hospital Instrument Sets - Waiver Form

I, _____ (name of care provider), at _____ /
(primary hospital site / health authority [HA]) acknowledge and agree to the following:

1. _____ (insert HA) has offered to provide me with certain home birth equipment (hospital instrument sets), but I have declined such equipment and have elected to use my own equipment in my practice as a care provider for home births.
2. I am responsible for the reprocessing and sterilization of my equipment, at my own expense, in accordance with the provincial sterilization standards outlined in [Best Practice Guidelines for Cleaning, Disinfection, and Sterilization of Critical and Semi-critical Medical Devices in BC Health Authorities](#). I understand that _____ (insert HA) will not reprocess and sterilize non-HA equipment.
3. I assume all responsibility for ascertaining whether my equipment is fit for the use to which I intend to put it and I am not relying on any representation or warranty by _____ (insert HA) in connection with the foregoing.
4. I hereby release _____ (insert HA), its directors, officers, employees, contractors, representatives and agents from any liability, loss, damage or claim that may arise as a result of the use of my own equipment.
5. If I decide at a later date to use the hospital instrument sets provided by the HA, I will notify my primary site manager.

<p>Signature of care provider:</p> <p>_____</p> <p>Name (print):</p> <p>_____</p> <p>Date signed (dd-mm-yyyy):</p> <p>_____</p>	<p>Signature of witness (HBSP HA lead or HBSP site lead):</p> <p>_____</p> <p>Name of witness (print):</p> <p>_____</p> <p>Date witnessed (dd-mm-yyyy):</p> <p>_____</p>
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Original – HBSP HA or site lead
Copy – care provide

Appendix J: Home Birth Records Submission

Frequently Asked Questions (FAQ)

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WHICH RECORDS NEED TO BE SUBMITTED

1. Which records need to be submitted?

A copy of the following perinatal forms is to be submitted:

- Antenatal Record Parts 1 and 2
- Labour and Birth Summary
- Newborn Records Parts 1 and 2
- Labour Partogram

2. Is there anything else that needs to be submitted?

A home birth fax cover sheet (see example) must be included for each client. This cover sheet must include the following information:

- Name of primary midwife who attended the delivery/birth
- Contact phone number for midwife
- Name of midwife's primary hospital site
- Name of woman/person and newborn (if known)

3. Can the submitted home birth records be copies of the original forms?

Yes, please submit copies. Originals should be maintained by the midwifery practice. Hospitals will only use the forms for data collection purposes before destroying them afterwards.

WHERE ARE RECORDS SUBMITTED

4. Where do I submit home birth records? Can I fax them?

Each health authority has developed a submission process for home birth records. Please refer to the Primary Hospital Site Contact List for Each Health Authority for contacts to get further details. As many of the faxes are shared, prior to faxing the records, please phone the primary hospital site.

5. Can home birth records be dropped off in the Medical Device Reprocessing Department or the labour delivery room?

No.

6. I attend home births for women/people who are registered at different hospitals which may or may not be in different health authorities. Where do I submit my home birth records?

Regardless of where a woman/person is registered or where they live, submit the home birth records for the delivery to your primary hospital site.

7. I am a locum and move between multiple hospitals in multiple health authorities. Where should I submit my home birth records?

While on locum, please submit the home birth records to the primary hospital site of the midwife you are covering for.

8. If a home birth results in a hospital transfer, do I need to submit my home birth forms?

- In the case of a planned home birth that takes place at home – **Yes**. The records need to be faxed to your primary hospital site.
- The case of a planned hospital birth that takes place at home – **Yes**. The records need to be faxed to your primary hospital site.
- In the case of a planned home birth that transfers into hospital in the immediate postpartum – **Yes**. The records need to be faxed to your primary hospital site.
- In the case of a planned home birth that transfers into hospital in labour – **No**. The birth will be entered in the perinatal data registry (PDR) via the hospital records system as it would be for any hospital birth (however, it will still be recorded as a planned home birth).

To assist in your decision making, ask the following question: did the birth occur at home? If yes, fax in the records to your primary hospital site. If no, do not fax in the records.

WHY IS THE DATA COLLECTION PROCESS CHANGING FOR HOME BIRTHS

9. Why do we need to transition to submitting home birth records to health authorities?

This is an important part of Home Birth Supplies Program where health authorities will now include home birth data in their routine data collection. This new system will ensure that data for hospitals and home births are integrated in each health authority. It will enable direct and timely information on the number of home births occurring, so that each health authority can efficiently administer HSBP, continue to improve its operations and further integrate midwifery services.

10. Why should the Labour Partogram form be submitted with the Antenatal 1 and 2, Labour & Birth Summary, and Newborn 1 and 2 forms for home births?

The Labour Partogram is a provincially standardized clinical form and its completion is applicable during all home and hospital deliveries. It provides necessary perinatal information for the BC Perinatal Data Registry and is part of the suite of provincial perinatal forms.

PRIVACY AND USAGE

11. How are the privacy and the confidentiality of the Labour Partogram form maintained?

The Labour Partogram, along with all other perinatal forms for home births, will be stored securely and separately from all inpatient and outpatient hospital records. Provincial privacy legislation protects these documents from unauthorized access and usage.

12. How long are home birth records retained and stored in the hospital?

All home birth records will be archived for two years before being destroyed as per hospital guidelines and standards.

13. How will home birth records be used?

Home birth records will be used only for data collection into the BC Perinatal Data Registry. Once the records have been processed for data collection purposes, they will be securely retained and stored separately from the hospital's inpatient and outpatient hospital charts. Home birth records submitted for data collection will not be accessed for quality assurance purposes.

14. How will the data be used and by whom?

The data will be used by PSBC to report on births in BC in its regular and special reports. These reports provide information important to healthcare partners such the BC College of Nurses and Midwives, the Midwives Association of BC, health authorities and the Ministry of Health to monitor trends and outcomes of women/people in midwifery care. The data is used by health authorities for reporting, planning and budgeting; standardization of care; and evaluation of services. In addition, investigators, students and clinicians regularly access data from the BC Perinatal Data Registry for research and statistical purposes under the Freedom of Information and Protection of Privacy Act (FIPPA). The BC Perinatal Data Registry does not collect information that permits the identification of individual health care providers.

PRIMARY HOSPITAL SITE CONTACT LIST FOR EACH HEALTH AUTHORITY

Primary Hospital Site	Contact	Phone
PHSA		
BC Women's	Brenda Chamish Wendy Wang	604-875-2424 Ext 2965
Vancouver Coastal and Providence Health		
All VCH hospitals and St. Paul's	Cindy Louie	604-682-2344 Ext. 62028
Fraser Health		
All FHA hospitals	Caylie Gibb	604-585-5666 Ext. 778637
Island Health		
Central, Northern and Southern Island hospitals	Angie Kinrade	250-737-2030 Ext. 44230
Victoria General	Elizabeth Waddell	250-727-4000 Ext 16524
Northern Health		
All NHA hospitals	Melanie Moffatt	250-617-9482
Interior Health		
Creston Valley Elk Valley	Gail Thompson	250-428-3834
East Kootenay Regional Golden District Invermere District	Amanda Cumming Cheryl Towers	250-426-5281 Ext 6340
Vernon Jubilee	Fawn Myndzak	250-558-1200 Ext. 1586
Kelowna General	Grace Yan	250-862-4300
Penticton Regional	Donna Porter Tara Lund	250-492-4000
Kootenay Boundary Arrow Lakes	Leanne Palmer	250-364-5169
Kootenay Lake	Carolyn Stefani Janice Hall	250-354-2315
Royal Inland Nicola Valley 100 Mile House Queen Victoria Lillooet District Dr. Helmcken	Jane Kitazaki Shalla Guertin	250-314-2520
Shuswap Lake	Janell Austin	250-833-3636 Ext. 2220

CLIENT COVER SHEET FOR RECORD SUBMISSION

Please create a cover sheet (example below) for each client and submit together with a copy of the client's perinatal forms to your primary hospital site. All cover sheets created **must** contain all the information below.

.....

HOME BIRTH RECORDS SUBMISSION Fax Cover Sheet (for EACH client)

(Check records included in package)

_____ Antenatal Record (Parts 1 & 2)

_____ Newborn Record (Parts 1 & 2)

_____ Labour and Birth Summary

_____ Labour Partogram

Today's Date:

Midwife's Name:

Midwife's Phone Number:

Midwife's Primary Hospital Site:

Client Name:

Appendix K: Product Distribution Centre (PDC)

Frequently Asked Questions (FAQ)

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WHAT IS THE PRODUCT DISTRIBUTION CENTRE (PDC)?

1. What is the Product Distribution Centre?

The PDC is a Health Canada licensed full-service inventory management and distribution facility established by the BC Government for use by provincial government ministries, crown corporations, government-funded organizations and federal and municipal governments.

The facility includes a self-contained BC College of Pharmacists regulated dispensing pharmacy and a 50,000 square foot warehouse that mainly supplies health care products, medical devices, pharmaceuticals and safety related products.

The PDC ships supplies and medications across the province through a simple online ordering system.

Product Distribution Centre (PDC)

If you have questions about your order, please contact the Customer Service:

Phone: 604-927-2000
Fax: 604-927-2025
Email: PDCCustomerSer@gov.bc.ca

Product Distribution Centre
2370 United Blvd
Coquitlam, BC V3K 6A3

2. Besides the Home Birth Supplies Program (HBSP), what other programs order supplies from the PDC?

Major PDC programs include:

- At Home Care Program for the Ministry of Children and Family Development
- Income Assistance At Home Care Program for the Ministry of Social Development and Social Innovation
- BC Ambulance Service of the BC Emergency Health Services

WHAT CAN BE ORDERED THROUGH THE PDC?

3. What can be ordered through the PDC?

Only supplies and medications for use in the home birth setting can be ordered through the HBSP. Supplies,

equipment and medications for use in private offices or clinics must not be ordered through the HBSP.

4. What are the items available through the PDC for the HBSP?

Disposable supplies (aka consumable) – these are supplies that are intended to be used once and then disposed of. Some over-the-counter medications are included in this category. Eg. gravol (diphenhydramine)

Reusable equipment – is equipment that is re-used by a care provider for multiple home births. Eg. suction pumps, stethoscopes

Medications – medications requiring a prescription that are used while providing care during home births. Eg. misoprostol, oxytocin

5. How do I order items from the PDC?

Disposable supplies: orders are placed online via the PDC shopping cart. The PDC will provide you with your login information.

Reusable equipment: Care providers must complete two forms to be able to order reusable equipment. The first form is the HBSP Reusable Equipment Approval Form and the second is the PDC Order Form for Reusable Equipment. Complete the two order forms, including any required order justification and documentation (insurance claim etc.). Send them both via fax/e-mail to the [HBSP HA or Site Lead](#) (Appendix A) representing the HBSP primary hospital site of the care provider. After review and completion, the HBSP HA or site lead will notify the care provider of approval/denial for ordering and provide the care provider with copies of the signed forms. Once these forms have been sent back to the care provider, the provider can proceed with ordering the reusable equipment by faxing the signed PDC Order Form for Reusable Equipment, following the directions on the form. The PDC only requires the PDC Order Form for Reusable Equipment to be sent to them. Once they receive a signed order form from a care provider they will fulfill the order and ship it.

Medications: If a medication requires a prescription, a form that is on the landing page for the HBSP on the PDC website needs to be completed and submitted as per instructions on the form. There are two different forms, one for medications not requiring refrigeration and a separate form for those medications that do require refrigeration. Ensure you are using the most current versions of these forms.

6. How do I order items I've seen on the larger PDC shopping cart?

The PDC has created a shopping cart exclusive to the HBSP (~170 items). Only those care providers with an account number for the HBSP can order items from the HBSP shopping cart.

Even though a care provider has an account number for the HBSP, they will only be able to order items from the HBSP shopping cart, not the larger PDC shopping cart (4000+ items). It should be noted that some items on the larger PDC shopping cart are on HBSP shopping cart.

7. How can I suggest an item be included on the HBSP shopping cart?

Items for consideration for inclusion on the HBSP shopping cart can be submitted via email to Perinatal Services BC.

The list of suggested items will be regularly reviewed by the HBSP Advisory Committee. Considerations such as evidence based best practices, CMBC professional practice standards, and provincial clinical standards will be taken into account in determining if items are added to the HBSP shopping cart.

8. Can I order items not on the HBSP shopping cart privately?

No. The account number that has been set up for care providers is only for items on the HBSP shopping cart. The PDC does not invoice individuals, only government agencies.

WHAT IF MY PDC ORDERS ARRIVES AND THERE IS A PROBLEM?

9. My order arrived and includes items I did not order. What do I do?

Contact PDC customer service within two days of receiving the item and they will accept return of the item if you did not order the item or they sent more of an item than you ordered.

10. My order arrived and there are damaged items. What do I do?

Contact PDC customer service within two days of receiving the item and they will accept return of the item.

11. My order arrived and the medication I ordered is about to expire. What do I do?

Contact PDC customer service within two days of receiving the medication with the short expiry and they will accept return of the item. They will accept the return of medication if the expiry is within 30 days.

WHAT IF SOMETHING HAPPENS TO REUSABLE EQUIPMENT THAT I ORDERED THROUGH THE PDC?

12. Unfortunately, a piece of reusable equipment that I ordered through the PDC has been stolen or lost. What do I do?

In some cases, stolen or lost property is covered by your own personal insurance. In these situations, the money received through an insurance claim should be used to purchase a replacement item. If you do not have personal insurance, please speak with your manager to determine if a replacement item can be purchased through the HBSP.

13. The piece of reusable equipment I purchased through the PDC is broken. Now what?

In some instances, a piece of broken equipment may be under warranty. Please contact the PDC customer service office and they will assist with managing a manufacturer's warranty.

14. I have heard that a piece of reusable equipment has been recalled. Do I need to do something?

As per Health Canada regulations, the PDC will be notified by the manufacturer if an item that is stocked by the PDC has been recalled. The PDC will then check its electronic ordering system and determine what account numbers have ordered the item affected by the recall. The PDC will contact the account number holder with instructions pertaining to the item recalled. It is the responsibility of the care provider to maintain current contact information with the PDC and to follow all instructions provided. Failure to comply with a recall process will result in suspension of your PDC account.

15. How often can I replace the reusable equipment?

The intent of the HBSP is not to replace all of the reusable equipment in every provider's home birth kit at one time, but to replace them on an as needed basis. The anticipated lifespan of reusable equipment is five years. Ordering reusable equipment requires prior approval by the HBSP HA or site lead for the care provider's primary site.

Except in extenuating circumstances, equipment will not be replaced if the previous piece of equipment was purchased within the last five years. If the home birth equipment is in good working order, it should be used for the entire duration of its lifespan. The home birth equipment is the property of the HA and it is expected that the care provider maintains, stores and uses it in an appropriate manner.

- Theft or loss of equipment: If the equipment is lost or stolen, the care provider must go through their Commercial General Liability (CGL) insurance for replacement. HA's must be reimbursed

for the cost of the equipment. Contact the HBSP HA or site lead to arrange. Approval for repurchasing from the PDC will be the responsibility of the HBSP HA or site lead.

- Defective/broken equipment: If the equipment is defective/broken, it is the responsibility of the care provider to contact PDC customer support for warranty information.
- Recall of equipment: If the equipment is recalled for safety, it is the responsibility of the care provider to comply with the recall in a timely manner (see Section 5.4).

CAN ITEMS BE ORDERED IN BULK?

16. I am part of a clinic that has a number of practicing care providers. In order to save administrative time and shipping costs, can a group order be placed for all of us?

Placing an order through the PDC for **disposable** supplies (see Q#4) for multiple care providers is acceptable. This would need to be done using the account number for an individual in the group practice. Setting up an account number specifically for a group practice is not possible within the PDC's ordering system.

It is requested though, that due to the approval process, warranty and recall logistics, each care provider order their own **reusable** equipment.

WHAT HAPPENS IF I AM JOINING/LEAVING THE HBSP?

17. How do I start to order supplies and medications from the PDC?

Once you have received provisional or active privileges at a hospital (or temporary new grad privileges where such a program exists), this becomes your primary hospital site. Meet with the HBSP HA lead or lead for this site to review and sign the HBSP agreement (previously called the policy statement). They will inform you how to access the hospital instrument sets and oxygen tanks. In addition, they will complete an add/remove form for the PDC in order to have an account set up for you. Finally they will advise you on where to fax your home birth records.

If you have admitting privileges at more than one hospital, determine which hospital you wish to be your primary hospital site and speak with the HBSP HA or site lead for that site.

18. I am planning on leaving my practice eg. retiring or leaving the province. What are my responsibilities regarding the PDC?

As there are a number of components to the HBSP, there are a few things to think about:

- If you have ordered reusable items from the PDC, discuss with the HBSP HA or site lead how to return these items as they belong to the HA. Note: due to Health Canada regulations, the PDC will not accept returns except in very rare circumstances.

19. I am moving my practice. What do I do?

- Within the province, but to a different health authority – As above (see Q#14). Once moved to the new health authority, contact the HBSP HA or site lead at your new primary hospital site to become re-instated into the HBSP. They will need to submit a form to the PDC to activate a new account for you.
- Within the same health authority – discuss with the HBSP HA or site lead at the primary hospital site you are leaving, as this move may or may not require a new PDC account number and they may or may not require you to return reusable equipment.

Please review the following algorithms for more information on joining or leaving the HBSP:

[Adding or removing care provider algorithm](#)

Appendix L: Home Birth Supplies Program (HBSP) - Leaving Checklist

The checklist below details the steps to be taken by HBSP HA lead or HBSP site lead and care providers when a care provider leaves a health authority or primary hospital site.

(Check when complete)

1.0 Product Distribution Centre (PDC)

- ☐ If reusable items were ordered from the PDC, these have been returned to the primary hospital site (eg. doppler, stethoscope, etc). (See Appendix I for detailed list)
- ☐ PDC account for care provider cancelled by manager ([please use this form](#)).

2.0 Hospital Instrument Sets

- ☐ Hospital instrument sets have been returned to primary hospital site for reprocessing and re-distribution. (See Appendix II for detailed list) OR NO instrument sets provided to care provider and waiver is on file with the HBSP HA or site lead.

3.0 Oxygen Tanks

- ☐ Oxygen tanks have been returned to primary hospital site for refilling and re-distribution.

4.0 Submission of Records for Home Births

- ☐ All required forms for all home births have been submitted to the location designated by the primary hospital site or health authority

Signature of care provider: <hr/> Name (print): <hr/> Date signed (dd/mm/yyyy): <hr/>	Signature of witness (HBSP HA lead or HBSP site lead): <hr/> Name of witness (print): <hr/> Date witnessed (dd/mm/yyyy): <hr/>
--	---

Original – HBSP HA or Site Lead
Copy – Care Provide

Appendix I: Reusable Equipment List

PDC Code	Description	Previous Order Date (dd/mm/yyyy)	Returned Check (✓)	Notes
6515871476	CHARGER/ADAPTER AC/DC DEVILBISS EA		<input type="checkbox"/>	
6680990091	CHARGER/ADAPTER AC/DC LAERDAL COMP SUCT		<input type="checkbox"/>	
6515871477	CORD POWER AC 7314P-613 DEVILBISS CHARGE		<input type="checkbox"/>	
6515110800	DOPPLER FETAL AUD 2MHZ PROBE HUNT LG 1/BX		<input type="checkbox"/>	
6515110090	CARRYING CASE FOR HUNT LG DOPPLERS 1EA		<input type="checkbox"/>	
6515508383	HEADLAMP LED 2075 LUMENS DUAL COAST		<input type="checkbox"/>	
6515110158	OXIMETER PULSE DIGITAL EDAN EA		<input type="checkbox"/>	
6515508597	OXIMETRY NEONATAL WRAP SENSOR REUSE EA		<input type="checkbox"/>	
6515508639	PAD HEATING DIGITAL 12" X 24" BIOS EACH		<input type="checkbox"/>	
6515508602	REGULATOR OXY CP FOR SIZE "D" O2 TANK EA		<input type="checkbox"/>	
6515160180	SPHYGMOMANOMETER KIT ADLT DURASHOCK		<input type="checkbox"/>	
6515160182	SPHYGMOMANOMETER CUFF RUSE LG ADLT		<input type="checkbox"/>	
6515160189	SPHYGMOMANOMETER CUFF RUSE SM ADLT		<input type="checkbox"/>	
6515990001	SPHYGMOMANOMETER INFLATION BULB WA		<input type="checkbox"/>	
6515160118	STETHOSCOPE DUAL HEAD LITTMANN BLK EA		<input type="checkbox"/>	
6515508398	STETHOSCOPE FETAL 22" ALMEDIC EA		<input type="checkbox"/>	
6515110153	STETHOSCOPE INFANT LITTMAN CLASSIC EA		<input type="checkbox"/>	
6515872083	SUCTION UNIT W/800ML CANIST DEVILBIS KIT		<input type="checkbox"/>	
6685190007	THERMOMETER DIGITAL SURETEMP W/A EA		<input type="checkbox"/>	

Appendix II: Hospital Instrument Set List

Bundles issued to care provider:

two birth bundles, two suture bundles, one UVC bundle and one episiotomy scissors
(note: some sites include episiotomy scissors in birth bundles)

Or

Care provider declined issue of hospital instrument sets and HBSP hospital instrument set waiver is on file with the HBSP HA or site lead

Appendix M: Introduction to HBSP Letter for Care Provider

Date:

We are pleased to introduce you to the Home Birth Supplies Program. The Home Birth Supplies Program (HBSP) is a provincial program managed by Perinatal Services BC and funded and administered by the health authorities and their designated HBSP health authority leads. In addition, a provincial advisory committee oversees the HBSP. Care providers who offer home birth, predominantly registered midwives, have access to the HBSP to support the provision of this health service.

Overview: The HBSP supplies care providers with the reusable equipment, disposable supplies, medications, instruments and oxygen tanks required to offer home birth services. These items are the property of each health authority and are loaned to the care provider. This program also includes data submission on home births.

Eligibility: Care providers granted provisional, active or temporary new graduate privileges (where such program exists) are eligible for the HBSP. Those care providers holding locum privileges are not eligible for the HBSP; however, they will have access to components of the program via the care provider for whom they are providing locum services. It is expected that the locum care provider will use the equipment, supplies, medication, instruments and oxygen tanks of the care provider for whom they are locuming.

How to join the program: Please contact the HBSP health authority or site lead associated with the hospital at which you have been granted privileges. In all health authorities there is one person designated as the HBSP HA lead and in some health authorities, hospitals also have a HBSP site lead. For further information please see the attached diagram that will provide the contact details along with an overview of the process for enrolling in the HBSP.

For care providers who hold privileges elsewhere: Some care providers will hold privileges at multiple hospital sites; however, only one site will be designated as your primary hospital site for the HBSP. It is through your primary hospital site that you will be connected with the HBSP. If you already have a designated primary hospital site then no further action is required and you will continue to use the oxygen tanks and instruments sets from your primary site. If you plan to change your primary hospital site please contact the HBSP health authority lead.

Further Information: Details of the HBSP will be provided to you by the HBSP health authority lead in your local area. Information is also available [online](#).

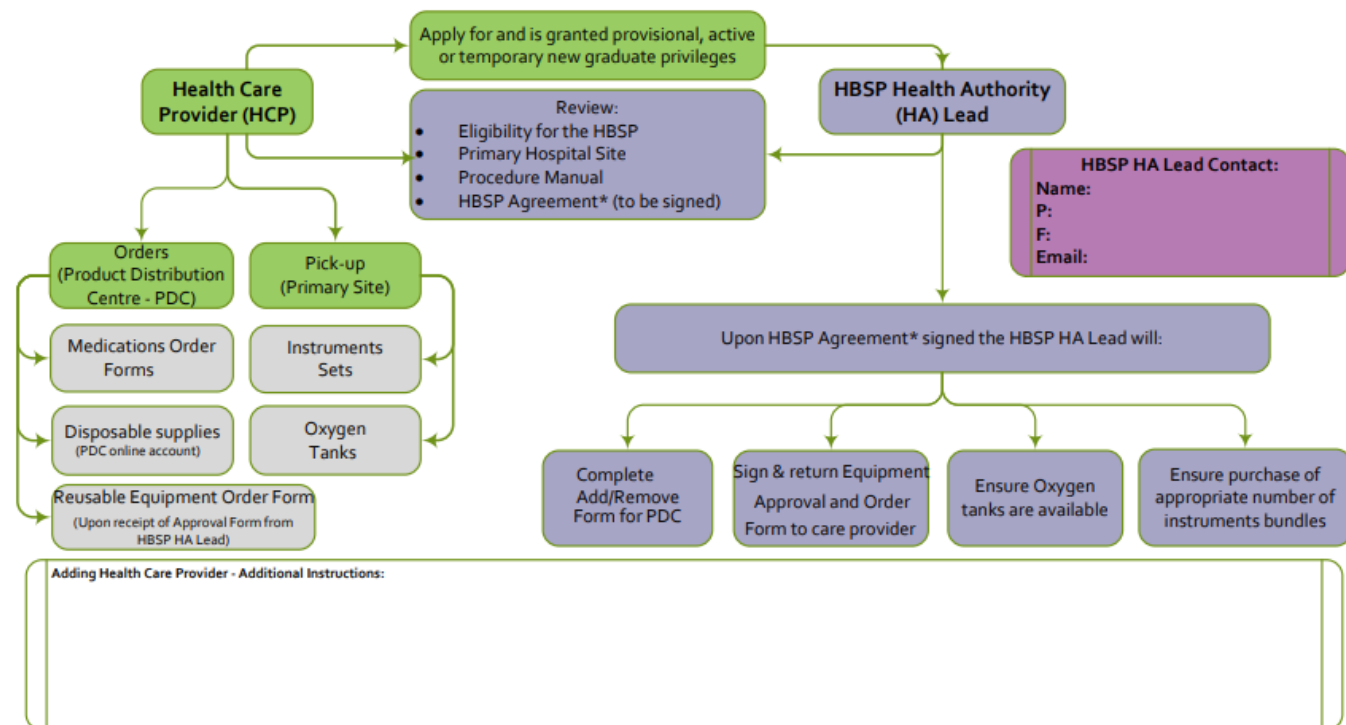
Sincerely,

Perinatal Services BC



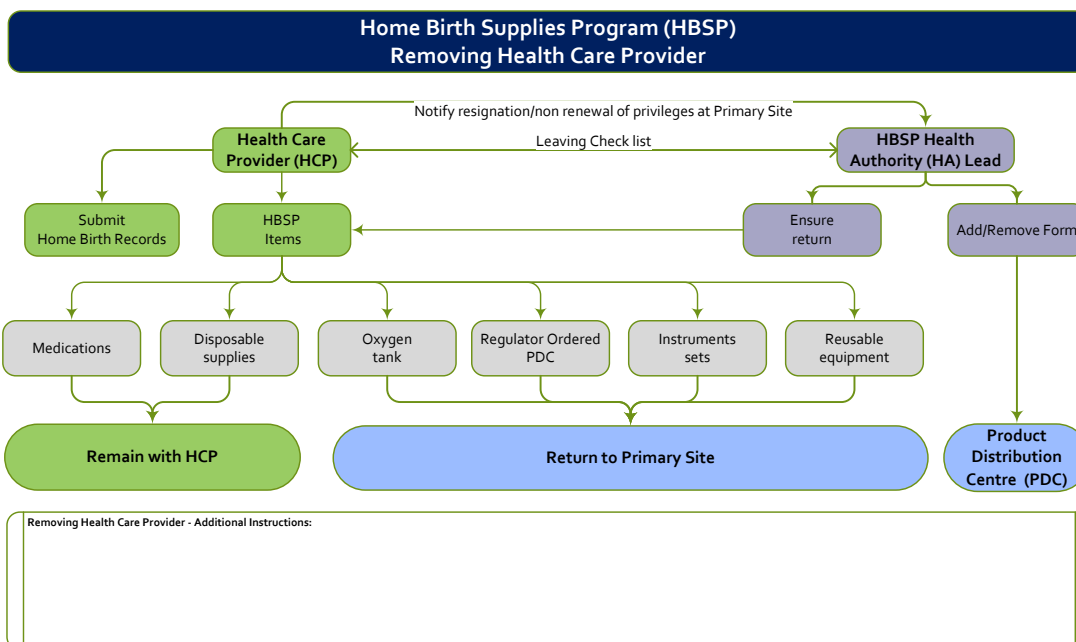
Attached: HBSP Adding/Removing Care Providers Work Flows
Original – HBSP HA or Site Lead
Copy – Care Provider

Home Birth Supplies Program (HBSP) Adding Health Care Provider



* Previously called Policy Statement

Home Birth Supplies Program: Adding Care Provider Algorithm
Issued: May 2021



Home Birth Supplies Program: Removing Care Provider Algorithm
Issued: May 2019

Appendix N: Home Birth Supplies Program (HBSP) - Agreement

The BC Home Birth Supplies Program (HBSP) came into effect April 1, 2016. The program is a standardized provincial program for all care providers attending home births to access supplies, medications and sterilization services solely for use in the home birth setting. The HBSP also supports accurate and complete data collection for home births for the purposes of provincial and regional planning. The HBSP is funded, managed and monitored by the health authorities for the hospitals and care providers in each region.

To be completed by the care provider initially joining the HBSP or subsequently moving to a new primary hospital site and signed off by the HBSP HA lead or the HBSP site lead associated with the primary hospital site. Upon completion the HBSP lead(s) will:

1. Create a PDC account for care provider by completing the [Add/Remove Form](#).
2. Upon receipt of Reusable Equipment Approval Form and Order Form from care provider, complete and sign both forms and return to provider.
3. Advise care provider where to pick and to return instrument sets.
4. Advise care provider where to pick up and exchange oxygen tanks.
5. Advise care provider where to fax home birth records.

I, _____ (name of care provider), acknowledge and agree to the following:

1. Ordering Supplies and Prescription Medications from the Product Distribution Centre (PDC)

1. Order supplies and medications in a fiscally responsible manner.
2. Order a quantity of supplies reasonably anticipated to be used during home births.
3. Order supplies and prescription medications solely for use in the home birth setting.
4. Follow the approval process for ordering reusable equipment.
5. Continue to use reusable equipment ordered from the PDC, as long as such equipment remains in good working condition and only replace on an as needed basis.
6. Upon resignation or non-renewal of my privileges at my primary hospital site, I will return the reusable equipment ordered from the PDC to my primary hospital site in proper working order, excluding normal wear and tear.
7. In the case of an issue with a piece of equipment, contact PDC customer service to determine warranty process.
8. Follow all instructions of the PDC when notified regarding a medication or product recall.
9. Notify the PDC customer service within two business days if items delivered were not the items that were ordered or if items are delivered in a damaged state.
PDC Customer Service phone: 604 927-2285
Email: PDCCustomerSer@gov.bc.ca
10. Contact the PDC customer service if an order has not been delivered within the time frame outlined on the PDC website.
11. Supplies and non-refrigerated medications, delivery is usually 3 – 5 business days from the day of order.
12. Refrigerated medications, delivery is usually within 48 hrs of order.
13. Ensure great care while placing orders online to ensure they are accurate; confirming item, quantity, volume etc. PDC is unable to accept returns except in very rare circumstances due to Health Canada regulations. Costs associated with inadvertent over ordering or incorrect ordering, will be my responsibility.
14. I am not required to order home birth supplies from the PDC, but I will not be reimbursed the costs of ordering these supplies privately from another supplier.

2. Hospital Instrument Sets

- a. The hospital instrument sets are the property of the health authority and are issued to me by my primary hospitals site.
- b. Upon resignation or non-renewal of my privileges at my primary hospital site, I will return the hospital instrument sets I obtained in proper working order, excluding normal wear and tear.
- c. If I use the hospital instrument sets, I will bring them back to my primary hospital site for reprocessing and sterilization.
- d. Follow all instructions that may be provided by the Medical Device Reprocessing Department (MDRD) at my respective primary hospital site.
- e. Handle, use, clean and transport the hospital instrument sets with care. Please see [Instrument Reprocessing Frequently Asked Questions](#) (FAQ)

3. Hospital Oxygen Tanks

- a. The hospital oxygen tanks (2) are the property of the health authority and are issued to me by my primary hospital site.
- b. I will bring them back to my primary hospital site for refilling and/or hydrostatic testing as needed.
- c. Upon resignation or non-renewal of my privileges at my primary hospital site, I will return the hospital oxygen tanks I obtained in proper working order, excluding normal wear and tear.

4. Submission of Forms for Home Births

- a. Submit the required forms for each home birth to the location designated by the HA or my primary hospital site. Please see [Home Birth Records Submission Frequently Asked Questions](#) (FAQ)
 - Antenatal Record (Parts 1 & 2)
 - Labour Partogram
 - Newborn Record (Parts 1 & 2)
 - Labour & Birth Summary
- b. Use a cover sheet for each individual set of home birth records. Please see example of [Home Birth Records Submission Cover Sheet](#)
- c. Submit the required forms within 30 days of the birth.

5. Designated Primary Hospital Site

- a. Indicate your primary hospital site: _____
- b. Upon resignation or non-renewal of my privileges at my primary hospital site, I agree to notify the HBSP HA or site lead for this site.

Signature of care provider: _____ Name (print): _____ Date signed (dd-mm-yyyy): _____	Signature of witness (HBSP HA lead or HBSP site lead): _____ Name of witness (print): _____ Date witnessed (dd-mm-yyyy): _____
--	---

Original – HBSP HA or site lead
Copy – care provide

Appendix O: PDC Order Form for Reusable Equipment



Home Birth Supplies Program PDC Order Form for Reusable Equipment

This form is required for ordering reusable equipment only. The form must be approved by the health authority representative prior to submitting it to PDC.

Maximum quantity per order at any time is one of each of these items.

Check to order	PDC Code	Product Description*
<input type="checkbox"/>	6515871476	CHARGER/ADAPTER AC/DC DEVILBISS EA - not required if ordering new Devilbiss suction pump
<input type="checkbox"/>	6680990091	CHARGER/ADAPTER AC/DC LAERDAL COMP SUCT - required only for existing Laerdal suction pumps
<input type="checkbox"/>	6515871477	CORD POWER AC 7314P-613 DEVILBISS CHARGE - not required if ordering new Devilbiss suction pump
<input type="checkbox"/>	6515110800	DOPPLER FETAL AUD 2MHZ PROBE HUNTGL 1/BX
<input type="checkbox"/>	6515110090	CARRYING CASE FOR HUNTGL DOPPLERS 1EA – to be ordered with new Doppler only
<input type="checkbox"/>	6515508383	HEADLAMP LED 2075 LUMENS DUAL COAST
<input type="checkbox"/>	6515110158	OXIMETER PULSE DIGITAL EDAN EA
<input type="checkbox"/>	6515508597	OXIMETRY NEONATAL WRAP SENSOR REUSE EA
<input type="checkbox"/>	6515508639	PAD HEATING DIGITAL 12" X 24" BIOS EACH
<input type="checkbox"/>	6515508602	REGULATOR OXY CP FOR SIZE "D" O2 TANK EA
<input type="checkbox"/>	6515160180	SPHYGMOMANOMETER KIT ADLT DURASHOCK
<input type="checkbox"/>	6515160182	SPHYGMOMANOMETER CUFF RUSE LG ADLT
<input type="checkbox"/>	6515160189	SPHYGMOMANOMETER CUFF RUSE SM ADLT
<input type="checkbox"/>	6515990001	SPHYGMOMANOMETER INFLATION BULB WA – for replacement
<input type="checkbox"/>	6515160118	STETHOSCOPE DUAL HEAD LITTMANN BLK EA
<input type="checkbox"/>	6515508398	STETHOSCOPE FETAL 22" ALMEDIC EA

<input type="checkbox"/>	6515110153	STETHOSCOPE INFANT LITTMAN CLASSIC EA
<input type="checkbox"/>	6515872083	SUCTION UNIT W/800ML CANIST DEVILBIS KIT
<input type="checkbox"/>	6685190007	THERMOMETER DIGITAL SURETEMP W/A EA

*for more product details please search using product PDC Code in the **View Full Catalogue** section on PDC Shopping Cart

To be completed by care provider

Care provider's name	
PDC customer number	
Date:	

To be completed by health authority representative*

Health authority representative*	NAME (Please print)	
	EMAIL (to be used for confirmation)	
	Date of approval	
	SIGNATURE	

***Health authority representative as listed in the Schedule C of the Access Agreement**

Please send the completed order form to:

PDC Customer Service

via email PDCCustomerSer@gov.bc.ca

or FAX (604) 941-6632.