## **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 (dd/mm/yyyy):
Midwife's Name:
Midwife's Phone Number:
Midwife's Primary Hospital Site:
Client Name: