

## Guidelines for Routine RhD Immunoglobulin Prophylaxis

To: Lead Maternity Carers and Specialist Obstetricians

From: The New Zealand Blood Service

### **Routine Administration of Antenatal Anti-D Prophylaxis (RAADP)**

You have made the decision to provide routine Anti-D prophylaxis to your patient.

It is absolutely essential that women be screened again for pre-existing anti-D and that a blood sample is taken **before** the first routine prophylactic injection is given at 28 weeks.

The result of the test does not need to be available before administration of the product

No repeat screening is necessary before the second administration at 34 weeks.

One-dose RAADP: There may be situations where a single dose can only be provided. In these situations two vials of Anti-D 625 IU giving a total dose of 1250 IU, is given at 30 weeks after a blood sample has been taken for red cell antibody screen.

For women with a BMI  $\geq 30$ , particular consideration should be given to factors which may impact on the adequacy of the injection, including the site of administration and the length of the needle used.

Differentiation between passively acquired and immune anti-D is important in determining if the fetus requires careful monitoring, or if further RhD prophylaxis is required by the mother postnatally. If anti-D is identified in the sample taken prior to administration, further investigations should be undertaken to determine whether this is immune or passive (i.e. previous administration of RhD Ig). Discussion with a Transfusion Medicine Specialist is recommended.

If you have any questions please contact a Transfusion Medicine Specialist.