These procedures are intended to describe procedures performed by Nurse Practitioners and/or Certified Nurse Midwives (depending on the clinical privileges granted to the individual practitioner) at UC San Diego Health.

I. Introduction:

This standardized procedure meets the standards for blood and blood product ordering as described in UCSDHS MCP 617.1

II. TRAINING AND EDUCATION REQUIREMENTS:

1. Nurse-midwives must have a current California Nurse-Midwife License from the Board of Registered Nursing, and current certification from the American College of Nurse-Midwives

2. They must have current privileges at UC San Diego Health System

III. METHODS FOR INITIAL AND CONTINUING EVALUATION:

1. Verification that the nurse-midwife meets the above requirements upon hire.

2. Review of reported incidents of incorrect ordering

IV. SETTINGS

Nurse-midwives may order or furnish Rh Immune globulin (RhIg) in the following settings:

- UCSD Medical Center locations- Hillcrest and Jacobs Medical Center
- Outpatient Clinics

V. SUPERVISION

Nurse-midwives may order Rh Immune globulin (RhIg) under the supervision of the physicians in the UC San Diego Reproductive Medicine Department. The physician supervisor is not required to be physically present at the time of patient examination by the nurse-midwife, but must be available at least by telephone.

VI. PROCEDURE

A. Data Base

1. At the initial prenatal visit, blood type, Rh, antibody screen (ABS) should be ordered. A positive ABS should have an antibody identification and titer performed.

2. A patient who is Rh-negative and has a negative ABS at the first visit should have the antibody screen repeated at 26 to 28 weeks.

3. Consultation with a physician is required if patient has a positive antibody screen at any time during pregnancy.
B. **Action**

1. If the Rh-negative patient has a negative antibody screen at 26-28 weeks gestation, Rh Immune globulin (RhIg) is ordered.
2. If infant is Rh-positive, RhIg is ordered postpartum.
3. If an Rh negative patient presents late to care, order RhIg as soon as possible.
4. RhIg may need to be administered to the Rh-negative patient in other circumstances, such as following SAB or TAB, CVS sampling, ectopic pregnancy, molar pregnancy, amnioncensis, 2nd trimester bleeding, 2nd or 3rd trimester fetal demise, or trauma.

C. **Patient Education**

1. Provide appropriate patient education including rationale for RhIg and need for antibody screening and RhIg in future pregnancies.

D. **Record Keeping**

   Document order in the patient record per Nurse-Midwife Guidelines and UCSD policies.

VII. **DEVELOPMENT AND APPROVAL**

This standardized procedure was developed through collaboration of nursing, the nurse-midwives, physicians, and administration at UCSD Medical Center. The Medical Staff Office will maintain a written record of nurse-midwives authorized to perform the functions of this standardized procedure.

VIII. **RESPONSIBILITY**

Please contact the Advanced Practice Council if you need help. The administrative assistant for the Chief Nursing Officer can direct you. Call; 619-543-3438.

IX. **HISTORY OF PROCEDURE**

Revised by the Committee of Interdisciplinary Practices: 2/26/2014, 9/28/2016
Reviewed by the Medical Staff Credentials Committee: 3/5/2014, 10/6/2016
Approved by the Medical Staff Executive Committee: 3/20/2014, 10/7/2016