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## Cord Bloods - for Rhesus Negative Women Policy

Hutt Maternity Policies provide guidance for the midwives and medical staff working in Hutt Maternity Services. Please discuss policies relevant to your care with your Lead Maternity Carer.

### **Purpose**

The purpose of this guideline is to

- provide safe and effective care for women
- establish a local approach to care, that is evidence based and consistent
- inform good decision making

### **Scope**

- To all medical, midwifery and nursing staff employed by the Surgical, women and children's directorate, and other practitioners holding an access agreement.
- Anaesthetic staff
- Theatre staff

### **Indications**

All women who have a Rhesus negative blood group who give birth in the Hutt Valley DHB.

### **Procedure**

Discuss with mother and partner the reason for taking cord blood.

The midwife in attendance is always responsible that this blood is taken, correctly labelled and sent to the lab.

After delivery of placenta, the midwife or theatre nurse in attendance is required to obtain a sample of cord blood for testing.

### **For neonatal grouping and DAT**

**(If mother is Rh Neg)** this can be either the artery or the vein. 6 mls of blood is required to be sent to the laboratory in a pink top tube (EDTA).

Blood tubes must be hand labelled in exactly the same way as the laboratory request form. It is vital that the information documented on the blood tube is identical to that on the laboratory request form.

### **Correct documentation**

On tube:

- Baby of 'mother's full name',
- Baby's date of birth and sex

On the lab form:

- Use white stickie label (available in delivery suite or theatre) with identical details to those on tube.

- Under blood transfusion request 'cord and neonatal group/DAT'
- Under clinical details specify 'cord blood / mother (specific blood group)'

(Maternal venous blood – 6mls (EDTA) should be taken for Kleihauer test after one hour post delivery)

### **Informed Consent**

The right of a consumer to make an informed choice and give informed consent, including the right to refuse medical treatment, is enshrined in law and in the Code of Health and Disability Consumers' Rights in New Zealand. This means that a woman can choose to decline treatment, referral to another practitioner, or transfer of clinical responsibility. If this occurs follow the process map on page 18 of the Referral Guidelines (Ministry of Health, 2012).