

WOMEN'S HEALTH MATERNITY UNIT

Guidance on preoperative haematology and blood transfusion investigations
for women booked for elective caesarean section

Amendments			
Date	Page(s)	Comments	Approved by
March 2018		Document review – No changes	Women's Health Guidelines Group

Compiled by: Dr Sam Soltanifar, Consultant Anaesthetist

In Consultation with: Consultant anaesthetists, Dr S. Newbold, Labour Ward Forum

Ratified by: Labour ward forum

Date Ratified: April 2013

Date Issued: April 2013

Next Review Date: march 2021

Target Audience: All staff working within maternity services

Impact Assessment Carried Out By: Dr Sam Soltanifar

Comments on this document to: Dr James Margaery/Sandra Newbold

Guidance on preoperative haematology and blood transfusion investigations for women booked for elective caesarean section

The vast majority of women undergoing elective caesarean section (CS) are at low risk of requiring a blood transfusion. The purpose of this guidance is to highlight those women at higher risk of haemorrhage so that appropriate investigations can be carried out.

Please consider the following for any patient planned for CS. If **none** are present, a FBC and G+S are **NOT** indicated at preoperative assessment

Risk factor	Tick if present	Action
Placenta praevia		FBC, X match 2 units red cells, ensure placental site scan sent to anaesthetic department with the CS date. (nicky.carroll@asph.nhs.uk)
Antibodies present on antenatal G+S		Take G+S sample, midwife to call blood bank, document plan on reverse of this form. If it will take >2 hours to get blood, then X match 2 units red cells.
Uterine abnormality e.g. bicornuate uterus or fibroids		If any one or more of these, FBC, G+S
Previous uterine surgery e.g. myomectomy		
Previous post-partum haemorrhage >1500ml		
3 or more previous caesarean sections		
Pre-existing anaemia (Hb < 9 g/dL)		
Thrombocytopenia (Platelets < 100)		
Coagulation disorder e.g. haemophilia		
Known liver disease		
Planned general anaesthesia		

References

National Institute for Health and Clinical Excellence. CG132 Caesarean Section. 2012

EQUALITY IMPACT ASSESSMENT TOOL

Policy/Service: **Guidance on preoperative haematology and blood transfusion investigations for women booked for elective caesarean section**

<p>Background</p> <ul style="list-style-type: none"> To ensure consistent and high standards of care within the maternity service. Maternity Services labour care Maternity Guideline group
<p>Methodology</p> <ul style="list-style-type: none"> The multidisciplinary team delivering maternity care had the opportunity to contribute to development of the policy.
<p>Key Findings</p> <ul style="list-style-type: none"> No negative impact found
<p>Conclusion</p> <ul style="list-style-type: none"> No impact
<p>Recommendations</p> <ul style="list-style-type: none"> Review in 3 years or earlier if required.

Guidance on Equalities Groups

<p>Race and Ethnic origin (includes gypsies and travellers) (consider communication, access to information on services and employment, and ease of access to services and employment)</p>	<p>Religion or belief (include dress, individual care needs, family relationships, dietary requirements and spiritual needs for consideration)</p>
<p>Disability (consider communication issues, access to employment and services, whether individual care needs are being met and whether the policy promotes the involvement of disabled people)</p>	<p>Sexual orientation including lesbian, gay and bisexual people (consider whether the policy/service promotes a culture of openness and takes account of individual needs)</p>
<p>Gender (consider care needs and employment issues, identify and remove or justify terms which are gender specific)</p>	<p>Age (consider any barriers to accessing services or employment, identify and remove or justify terms which could be ageist, for example, using titles of senior or junior)</p>
<p>Culture (consider dietary requirements, family relationships and individual care needs)</p>	<p>Social class (consider ability to access services and information, for example, is information provided in plain English?)</p>

If further assessment is required please see the Integrated Single Equality Scheme.

For advice in respect of answering the above questions, please contact Maria Crosbie, HR Manager, on extension 2552.

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PROFORMA FOR RATIFICATION OF POLICIES AND GUIDELINES BY RATIFYING COMMITTEE

Policy/Guidelines Name: Guidance on preoperative haematology and blood transfusion investigations for women booked for elective caesarean section

Name of Person completing form: Sam Soltanifar

Date: April 2013

Author(s) <i>(Principle contact)</i>	Sam Soltanifar	
Name of author or sponsor to attend ratifying committee when policy/guideline is discussed	Sam Soltanifar	
Date of final draft	April 2013	
Has this policy/guideline been thoroughly proof-read to check for errors in spelling, typing, grammar and consistency?	Yes	
By whom:	Labour Ward Forum	
Is this a new or revised policy/guideline?	New	
Describe the development process used to generate this policy/guideline. <i>Who was involved, which groups met, how often etc.?</i>		
Labour Ward Forum, Obs & Gynae Consultants, Obstetric Anaesthetic Consultants		
Who is the policy/guideline primarily for?		
Health Professionals working within the maternity service		
Is this policy/guideline relevant across the Trust or in limited areas?		
Maternity Services		
How will the information be disseminated and how will you ensure that relevant staff are aware of this policy/guideline?		
Intranet, newsletters, educational half day, training sessions		
Describe the process by which adherence to this policy/guideline will be monitored. <i>(This needs to be explicit and documented for example audit, survey, questionnaire)</i>		
See monitoring section of policy		
Is there a NICE or other national guideline relevant to this topic? If so, which one and how does it relate to this policy/guideline?		
See reference section of policy		
What (other) information sources have been used to produce this policy/guideline?		
See reference section of policy		
Has the policy/guideline been impact assessed with regard to disability, race, gender, age, religion, sexual orientation?		
No impact		
Other than the authors, which other groups or individuals have been given a draft for comment? <i>(e.g. staff, unions, human resources, finance dept., external stakeholders and service users)</i>		
All obstetric Consultants, Women's Health Guidelines Group, Labour Ward Forum, Obstetric Anaesthetic Consultants		
Which groups or individuals submitted written or verbal comments on earlier drafts?		
Any comments received considered by Women's Health Guidelines Group		
Who considered those comments and to what extent have they been incorporated into the final draft?		
All comments considered		
Have financial implications been considered?		
Yes		