



CONCEPTION TO 14 WEEKS

Alloantibody identified

Obtain baseline titer

Is the patient a candidate for IVIG? (Previous IUFD, previous IUT @ <24 weeks, or current titer ≥1024)

Consider IVIG (1 gr/kg weekly) starting @ 12 weeks

KEY

- Test (rectangle)
- Procedure (hexagon)
- Question (oval)
- Decision Point (rectangle)
- End Decision Point (rectangle)

Fetus must inherit the offending antigen

Father is homozygous for the antigen

Father is antigen negative & paternity is assured

Fetus cannot inherit the offending antigen. There is no risk of HDFN. No further testing for HDFN needed.

Stop IVIG immediately (if applicable)

What is the paternal blood type & zygosity? (Run DNA analysis for RHD, serology for other red cell antigens)

Father is heterozygous for the antigen OR paternity is uncertain

Which antibody?

Anti-D

Others

Fetus is at risk for HDFN

Run cffDNA @ or after 12 weeks

Fetus is antigen negative

Fetus does not have the offending antigen. There is no risk of HDFN. No further testing for HDFN needed.

Stop IVIG immediately (if applicable)

1st pregnancy, non-critical titers*

1st pregnancy, critical titers* (≥critical but <512)

1st pregnancy, very high titers (≥512)

Subsequent pregnancies**

15-17 WEEKS

No MCA scan needed unless titer levels reach critical.* Repeat titers every 4 weeks.

Begin MCA Dopplers weekly @ 15 weeks

Begin MCA Dopplers weekly @ 15-18 weeks**

Run cffDNA or amnio @ 15 weeks

What's the Peak MCA velocity?

18-31 WEEKS

Begin MCA Dopplers every 1-2 weeks @ 18 weeks

MoM ≥1.5

MoM <1.5†

Perform cordocentesis to determine fetal Hct

Repeat MCA Dopplers as scheduled

32-36 WEEKS

Begin repeating titers every 2 weeks @ 24 weeks

Fetal Hct ≤30%

Fetal Hct >30%

Perform IUT. Repeat IUTs as necessary.

Repeat cordocentesis in 1-2 weeks

Begin antenatal testing @ 32 weeks.

Begin antenatal testing @ 32 weeks. (Continue MCA Dopplers at physician's discretion.)

Begin antenatal testing @ 32 weeks. (Continue MCA Dopplers as scheduled.)

37 WEEKS TO DELIVERY

Delivery by 37-38 weeks‡

Test cord blood for hemoglobin, bilirubin, and DAT. See AHF Neonatal tree.

Deliver at term

FOOTNOTES

- * Critical titer levels: ≥4 for anti-Kell, ≥16 for all other antibodies
- ** For subsequent pregnancies with high titers, start weekly scans @ 15 weeks.
- † Antenatal steroids for fetal lung maturity can cause a reduction in Peak MCA Doppler results for 24-48 hours.
- ‡ Physicians may elect for earlier delivery if needed. Discuss with your doctor.