

Antepartum Determination of RhIG Candidacy

Maternal Rh(D) Sensitization	Maternal Rh(D)	Gestation	Reason RhIG Ordered by Physician	* FMH Indicated? (Yes or No)	RhIG Candidate? (Yes or No)	Result comment IDs for RHIGCAN	Result comment IDs for FMHA	Result Comment ID Descriptions
If allo anti-D is currently or historically detected in a maternal sample, refer to the policy <i>Maternal Rh(D) Sensitization / Requires Medical Director Review</i> before using this table to determine RhIG candidacy.	Rh(D) Negative or Weak D / Partial D positive Or Rh(D) Undetermined	0-12 weeks	Any reason	No	No	(free text description)	NA	<ul style="list-style-type: none"> Rh Immune Globulin not indicated <12 weeks
		12-23 weeks	Any reason	No	Yes	RHIG1 ROD	NA	<ul style="list-style-type: none"> One total vial Rh Immune Globulin indicated. Product available upon receiving the Blood Component/Pick Up form in the Blood Bank
		23 weeks or greater	Routine, prophylactic RhIG (Usually given at 28 weeks)	No	Yes	RHIG1 ROD	NA	<ul style="list-style-type: none"> One total vial Rh Immune Globulin indicated. Product available upon receiving the Blood Component/Pick Up form in the Blood Bank
			Any other reason (besides routine, prophylactic RhIG)	Yes	Yes	FMH ROD	RHFIN (Once FMH testing is completed)	<ul style="list-style-type: none"> More than 1 vial of RhIG may be indicated. Specimen sent to Flow cytometry for quantitative Fetal RBC Assay. Product available upon receiving the Blood Component/Pick Up form in the Blood Bank Additional Testing Complete. ____total number vials Rh Immune Globulin indicated.
	Rh(D) positive	Any	Error or Unknown History	No	No	RNCDP	NA	<ul style="list-style-type: none"> Not RhIG Candidate, Patient is Rh Positive

Refer to Transfusion Medicine Procedure, *Rh Immune Globulin Evaluation*
Revised 06/16/2025