

ISOIMMUNIZATION CASE
Hacker, et al. 4th Ed: Chapter 16

A 24 year old female, G2 P0010 at 12 weeks gestation presents for a routine antenatal visit. Her blood type is A negative. She had a spontaneous abortion with her first pregnancy 2 years ago, and cannot remember if she ever received Rhogam. Other initial labs, her antibody titer returns at 1:128. Please discuss this case, including management of Rh – women, current management based on the antibody titer, and fetal risks.

APGO Educational Topic 19: Isoimmunization

1. Describe the pathophysiology of isoimmunization, including:
 - a. red blood cell antigens
 - b. clinical circumstances under which D isoimmunization is likely to occur
2. Discuss the use of immunoglobulin prophylaxis during pregnancy for the prevention of isoimmunization.
3. Discuss the methods used to identify maternal isoimmunization and the severity of fetal involvement.