

Rh PROGRAM of NOVA SCOTIA

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How to administer Rho(D) Immune Globulin (WinRho®SDF *Liquid*) to Rh negative individuals for the prevention of Rh isoimmunization during pregnancy or potentially sensitizing events.

Background

WinRho®SDF *Liquid* can be administered either intravenously or intramuscularly. Either route is effective provided that the product is properly administered directly into either the vein or muscle. The product volumes are small:

Vial Size	Target Fill Volume
600 international units (120 mcg)	0.5 mL
1,500 international units (300 mcg)	1.3 mL

The final liquid product formulation is stabilized with 10% maltose and 0.03% (w/w) polysorbate 80. As per manufacture recommendation: withdraw the entire content of the vial to ensure correct dosage.

Practice considerations

Intravenous administration of **WinRho®SDF** *Liquid* is a competency for which nurses require special education and confirmation of their skills. Please check with your institution and read the product insert. For more information refer to the website www.winrho.ca.

Please note:

- 1. WinRho is a **blood product** and shall be stored at temperatures of 2-8°C in a temperature controlled and monitored refrigerator.
- 2. The product must **NOT** be frozen.
- 3. Once removed from blood bank refrigeration, WinRho must be maintained at room temperature and administered within 4 hours.
- 4. If the product is not needed and the seal is intact, it should be returned to a blood bank approved refrigerator *within 30 minutes* to avoid product wastage.
- 5. Do not use if expired.
- 6. Informed consent is required for **blood products** and shall be obtained by a physician, nurse practitioner or midwife prior to administration. This consent is valid for the remainder of the pregnancy and postpartum period.
- 7. Always verify Rh (D-antigen) negative status and recent antibody screen (within 14 days, local facility requirements may differ) prior to administration of WinRho.
- 8. If required: blood sample for antibody screen needs to be obtained *prior to* administration of WinRho.

- 9. Bring to body temperature just prior to use.
- 10. Explain procedure to patient.
- 11. Intramuscular administration considerations:

Administer using the appropriate needle directly into either the **deltoid**, **vastus lateralis**, **or ventrogluteal muscle**. **The** *dorsogluteal muscle* should *not* be used. **Rationale**: 1. Studies have shown that the placement of the sciatic nerve varies from one person to another, and 2. it may be difficult to ensure that the product has reached this muscle; **WinRho**®**SDF** *Liquid* cannot be properly absorbed if it does not enter *either* the muscle *or* the bloodstream.

NOTE: The deltoid muscle is only suitable for volumes up to 2.0 ml.

12. Intravenous administration considerations:

- a) Intravenous administration when an existing intravenous line is in place:
- Ensure intravenous patency
- Clamp off i.v. tubing just above lowest port, and using aseptic technique enter lowest port to flush with normal saline both *before* and *after* administering **WinRho**®**SDF** *Liquid*.

Rationale: WinRho®SDF is **only** known to be compatible with normal saline. Therefore, when this product is administered by intravenous bolus route into an already existing intravenous line, **it is necessary to flush the line prior to and post blood product administration with an adequate amount of 0.9% normal saline** to ensure that the dose of WinRho®SDF has been completely administered to the patient.

- b) Intravenous administration without an intravenous line in place:
 As stated above under "Practice considerations", intravenous administration of WinRho®SDF Liquid is a competency for which nurses require special education and confirmation of their skills. Please check with your institution and read the product insert. For more information refer to the website www.winrho.ca.
- 13. Patient should be observed for adverse reactions: 15 30 minutes post-administration of WinRho. Please follow hospital policy for appropriate actions in the event of adverse reactions.
- 14. If the *Liquid* product is not available, you may be supplied with the *lyphylized* product which must be mixed with the supplied vial of normal saline prior to administration. *Please read the product insert carefully so that you do not confuse this product with the Liquid formulation and prepare/administer accordingly by either intravenous or intramuscular routes.*

References

- 1. Perry & Potter. Clinical Nursing Skills & Techniques. Elsevier Mosby. 8th edition, 2014
- 2. WinRho®SDF *Liquid* Product Insert (monograph)
- 3. NSHA CL-BP-030, IWK-625 Blood Component and Blood Administration 2019

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