

CTP - Obstetrics and Paediatrics

Module Description

This module provides a comprehensive overview of UK transfusion practices in obstetric and paediatric care, with a focus on:

- Understanding the indications, risks, and benefits of blood transfusion in obstetric and paediatric populations.
- Application of UK-specific guidelines for safe and appropriate transfusion.
- Recognising special considerations in maternal and neonatal blood management.

In obstetrics, transfusion is most commonly required in the context of obstetric haemorrhage, including antepartum and postpartum haemorrhage (PPH). Key components within the obstetrics section includes physiological changes during pregnancy, recognition of pregnancy related anaemia, the use of Massive Obstetric Haemorrhage protocols, NICE and RCOG/ BSH recommendations related to specific blood products.

This module emphasises patient blood management (PBM), including antenatal and post-natal optimisation of haemoglobin, early identification of anaemia, and minimisation of unnecessary transfusion. Informed consent, risks (e.g. alloimmunisation, infection), and documentation are also covered.

Transfusion in paediatrics requires age-specific considerations, including smaller blood volumes, weight-based dosing, and immature immune responses. The module outlines indications for transfusion in neonates and paediatrics with reference to UK-specific guidance. Topics include irradiation of blood products for immunocompromised patients, CMV-negative components, and the importance of minimising donor exposure in neonates through the use of dedicated paediatric packs. The module also introduces the concept of top-up and exchange transfusions and their indications.

This module integrates evidence-based practice, UK practice guidelines, and safety standards to support high-quality transfusion care in obstetrics and paediatrics. Through case-based discussions and scenario-based learning, knowledge is built upon and skills expanded to contribute to safe, effective transfusion decision-making in these high-risk patient cohorts.