

## EXTERNAL REQUEST FORM FOR HISTOLOGICAL EXAMINATION OF PLACENTA AT RMCH

Please supply all of the following information Mother's details (or use sticker) Hospital: ..... Hospital No:..... Ward: ..... NHS No:.... Date taken: ..... First Name:..... Consultant (full name): ..... Last Name:..... Infection risk YES / NO and give details: ..... DOB:.... Urgent: YES / NO. If Yes state reason:..... Address:..... Form completed by:..... Post Code:..... Full contact number: ..... REFER FOR HISTOLOGY ONLY IF ONE OR MORE CRITERIA APPLY Tick Tick Abnormal umbilical artery Dopplers Massive placental abruption with (absent or reversed end diastolic flow) retroplacental clot. Size of Clot ..... Details: ..... Severe fetal distress defined as: pH < 7.05 or Early-onset (<32 weeks) Severe prebase excess ≥ -12 or scalp lactate > 4.8mmol/l eclampsia requiring latrogenic delivery Fetal growth restriction defined as: Severe maternal sepsis requiring maternal birthweight below 3rd centile or drop in intensive care admission and/or fetal sepsis fetal growth velocity of >2 quartiles or >50 requiring ventilation or level 3 NICU percentiles admission Centile ..... Stillbirth (antepartum or intrapartum) and Preterm birth (less than 32+0 weeks' very early neonatal death gestation) Special circumstance - Must be discussed Miscarriage (14+0-23+6 completed weeks' with RMCH Pathologist. gestation) Pathologist: ..... Date: ..... Baby for Post Mortem at RMCH Fetal hydrops **Maternal History** BMI: ..... Blood Group: ..... Parity: G\_\_\_\_\_ A \_\_\_\_\_ Gestational Age: ..... CIRCLE:-Delivery: Vaginal/Elective CS/Emergency CS Manual Placental removal: YES/NO Meconium stained liquor: YES / NO Cord accident: YES/NO Birth weight: .....(g) Infant: Male / Female Smoker YES / NO Alcohol / drug use: YES / NO Details: .....

Past Medical history & medication:

## **Directorate of Laboratory Medicine**



## The following do NOT meet referral criteria and must not be sent for histology

Cholestasis of pregnancy

'Gritty' placenta

Pruritis of pregnancy

Maternal diabetes with normal pregnancy outcome

Hepatitis B, HIV, etc

Other maternal disease with normal pregnancy outcome

Placenta praevia

Post-partum haemorrhage

Polyhydramnios

Rhesus negative mother with no fetal hydrops

History of maternal Group B streptococcus

Maternal coagulopathy

Maternal substance abuse

Uncomplicated twin pregnancy, any twin pregnancy where acceptance criteria are not fulfilled

Twin pregnancy, ?chorionicity

Congenital anomaly in infant/fetus

Common aneuploidies

Low grade pyrexia in labour

History of previous molar pregnancy

Normal pregnancy

Uncomplicated velamentous cord

## Special consideration to be sent to Adult Histopathology Gynae following discussion

Caesarean peripartum hysterectomy for morbidly adherent placenta

Suspected Trophoblastic disease

Clinician may discuss referral with RMCH Pathologist if criteria not met