



Society of Family Planning Statement on Rh testing in early pregnancy

The [Society of Family Planning committee consensus on Rh testing in early pregnancy](#), published in 2022, outlines the evidence based recommendation against Rh testing and Rh immunoglobulin administration prior to 12 weeks gestation for patients undergoing spontaneous, medication, or uterine aspiration abortion.

The Society recognizes the devastating impact the rare condition of RhD alloimmunization has on perinatal morbidity and mortality. As such, we are confident in the science and our published, peer-reviewed committee consensus. The Society's Rh testing in early pregnancy guidance is consistent with the [World Health Organization guidance](#) and [additional research](#) published since our guideline development. In addition to not being supported by the latest evidence, Rh testing and Rh immunoglobulin administration prior to 12 weeks gestation can be logistically and financially burdensome and pose a barrier to abortion care.

We are heartened to hear of clinicians and institutions that have aligned their clinical practices with the latest and best evidence. We hope they will continue to feel confident in those science-based changes. While we understand that science is translated into practice and policy at varying speeds based on many different factors, we strongly encourage clinicians, administrations, and institutions to prioritize adjusting clinical practice based on the best available evidence with an emphasis on person-centeredness.

We welcome continued reflection and partnership on this and other topics. Please email [Jenni Villavicencio](#) with your thoughts.