

ANESTHESIA REQUIRED LABS BEFORE NEURAXIAL (EPIDURAL OR SPINAL)

Normal healthy pt: no Pregnancy-Induced HTN, bleeding disorders, PLT disorders, or blood thinners:

No labs required by anesthesia prior to neuraxial.

Gestational HTN:

CBC required on admission, prior to neuraxial.

Mild PreE WITHOUT SF:

CBC required within 24h of neuraxial

Severe PreE WITH SF:

CBC required within 6h of neuraxial

HELLP or Eclampsia

CBC required within 6h, but as close as possible to neuraxial placement, and possible TEG may be requested if time allows, to better assess PLT function.

Thrombocytopenia (PLT <150):

Please inform anesthesia, may require additional CBCs, and possible TEG depending on condition.

Placental Abruption:

CBC and COAGS required AFTER diagnosis of abruption, and as close as possible prior to neuraxial.

IUFD:

CBC and COAGS required on admission, prior to neuraxial.

These basic guidelines may change at anesthesia provider discretion, depending on pt condition and additional comorbidities.