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Major Obstetric Haemorrhage Protocol

MAJOR OBSTETRIC HAEMORRHAGE PROTOCOL

Blood loss of >30% blood volume (approx. 1500ml in average adult) within 3 hours or 50ml/min

Call 2222. State "Major Haemorrhage". Give Hospital and Location

Nominated Transfusion Co-ordinator MUST CONTACT Blood Transfusion with the following:

- Patient identification Hospital Number, name & date of birth (or trauma patient details)
- Patient location
- 3. Name and contact details of Nominated Transfusion Co-ordinator for on-going communication
- Cause of bleeding
- 5. Confirm Group & screen, Full Blood Count & Coagulation Screen samples are being sent to laboratories

CALL THE BLOOD TRANSFUSION LABORATORY FOR YOUR HOSPITAL

Administer Tranexamic Acid

(except if GI bleed)

QUEEN CHARLOTTES

Monday-Friday 9am-5.30pm

Ext. 34772

Bleep 9122

ST MARY'S Monday-Friday 9am-5pm

Ext. 21157

Bleep 1611

The Blood Transfusion Laboratory will issue:

4 O negative RBCs & 4 FFP

4 group specific* RBCs & 4 FFP (*if valid sample in laboratory)

(If no valid samples continue to issue emergency blood)

Once these components are collected from the laboratory:

The laboratory will continue to issue 4 RBCs & 4 FFP, whilst the patient is bleeding until stood down from MHP

At this stage consider requesting:

- 1 pool platelets
- 2 pooled units of cryoprecipitate
- After 10 RBCs given consider Fibrinogen concentrate (50mg/kg) and/or Pro-thrombin Complex Concentrate (PCC)

Porters:

- Report to Transfusion Lab to collect blood, then to ward, except for:
- SMH & CXH A+E: Emergency porter will be advised by clinical staff when to collect blood components

Availability of Blood Components For Collection

Fresh Frozen Plasma 30 minutes to thaw

Cryoprecipitate 30 minutes to thaw

Platelets Immediate if on site

The clinical area will:

- Nominate a Transfusion Co-ordinator to ensure effective management of blood components
- Send full blood count & coagulation screen samples as a baseline and hourly thereafter
- Send repeat group & save sample if requested
- Ensure the patient's Consultant has been informed (if not already aware)
- Discuss on-going management including authorisation of other clotting factors with the Haematology SpR (contact through Switchboard if contact details not known)
- Where required ensure RBC are warmed appropriately
- Inform the Blood Transfusion Laboratory when STOOD DOWN

Imperial College Healthcare NHS Trust
MAJOR OBSTETRIC HAEMORRHAGE PROTOCOL
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