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Paediatric Major Haemorrhage Protocol

PAEDIATRIC MAJOR HAEMORRHAGE PROTOCOL

Rapid blood loss with shock or with no likelihood of control.
Anticipated or actual blood loss of 80mls/kg in 24 hours,
40 mL/Kg in 3 hours or 2-3mls/kg/min

**FOR USE IN CHILDREN
under 50Kg
For larger children - use
adult protocol**

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

Nominated blood monitor MUST CONTACT Blood Transfusion with the following:

1. Patient Identification
2. Approximate weight of child
3. Patient Location
4. Name and contact details of nominated blood monitor for on-going communication
5. Cause of bleeding (if known)
6. Confirm Group & Screen, Full Blood Count & Coagulation Screen samples are sent to laboratories
Consider using paediatric blood bottles

Call the Blood Transfusion Laboratory

24 hours a day Ext. 22043
Out of hours Bleep 1611

The Blood Transfusion Laboratory will issue:

20ml/kg O negative RBC & 20ml/kg FFP

Or

20ml/kg group specific* RBC & 20ml/kg FFP

(*if valid sample in Laboratory. If no valid samples continue to issue emergency blood)

**Clinicians to administer Tranexamic Acid
(except in GI bleeds)**

Once these

The laboratory will continue to issue until stood down from MHP:

20ml/kg RBC

20ml/kg FFP

10ml/kg Cryoprecipitate

15ml/kg Platelets (up to 1 pack)

After 80ml/kg RBC consider:

Fibrinogen Concentrate (50mg/kg)

Recombinant Factor VIIa (in discussion with
Haematology medical team)

Porters:

- Report to Transfusion Lab to collect blood, then to ward, except for:
- A+E at SMH & CXH: Report to A+E whereby staff will tell porters when to collect blood components
- Porters ext. 25293 at SMH

**Availability of Blood
Components For
Collection**

Packed Red Blood Cells
Immediately available

Pre-thawed
Fresh Frozen Plasma
Immediately available

Cryoprecipitate
30 minutes to thaw

Platelets
Immediately available

The clinical area will:

1. **Nominate two blood monitors to ensure effective management of blood components and communicate with the transfusion laboratory staff**
2. Send full blood count & coagulation screen samples as a baseline
3. Send repeat group & screen sample if requested
4. Discuss on-going management including authorisation of other clotting factors with the Haematology medical team (via Switchboard if contact details not known)
5. Inform the Blood Transfusion Laboratory when **STOOD DOWN**

Imperial College Healthcare NHS Trust
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Please remove and destroy any previous versions of the Paediatric Major Haemorrhage Protocol

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