

Critical Bleeding Protocol (CBP)- Neonatal



Senior clinician activates CBP and notifies Transfusion Medicine Unit (TMU)

"Activate Critical Bleeding Protocol"

Activated when: Estimated blood loss > 40ml/kg with shock and laboratory or clinical evidence of coagulopathy

Take 2 x crossmatch deliver to TMU urgently.

Also send ABG, Coags, FBC

Send PCA to TMU to collect Critical Bleed pack

IF BLOOD is required in <15 minutes request O negative RBC from TMU order 1unit O negative RBC

CRITICAL BLEED PACK 1
RBC give 20ml/kg

Cryoprecipitate give 5ml/kg

Alternate Packs 1 & 2



Rpt COAGS + ABG after each pack

CRITICAL BLEED PACK 2

RBC give 20ml/kg FFP give 15ml/kg PLT give 10ml/kg

Continue until bleeding controlled and hemodynamically stable then

NOTIFY TMU TO STOP CBP

TMU contact details

PCH: 0429 128316, 6383 4015 Vocera "Transfusion Medicine"

KEMH: 82748

SAMPLES

Crossmatch - Pink tube HANDWRITTEN Label Send 1 XM sample, keep 1 in case of PTS failure

AIM FOR

T > 36°C pH > 7.2 Normocapnia BE above -6 Lactate < 4mmol/L Ca2+ > 1.1mmol/L (use Ca Gluconate 10% 0.5ml/kg Plt > 50 x 109/L PT/APTT <1.5xnormal INR < 1.5 Fibrinogen> 2g/L

OPTIMISE

Physical measures IV access Oxygenation Cardiac output Temperature Metabolic state

CONSIDER

Art Line rFVIIa - Discuss with Haematologist

Notes:

RBC	CRYO	PLT	FFP
60ml/unit	35mls/pack	178ml/pack	70ml/pack

Endorsed by the Hospital Transfusion Committee, March 2019

This document can be made available in alternative formats on request for a person with a disability.

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