

# PAEDIATRIC MAJOR HAEMORRHAGE PROTOCOL

Rapid blood loss with shock or with no likelihood of control. Anticipated or actual administration of 40 mL/Kg of blood

FOR USE IN  
CHILDREN under  
50Kg  
Larger children - use  
adult protocol

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

Call the Blood Transfusion Laboratory

Monday-Friday 9am-5pm Ext. 21157/Trauma Ext. 22043

Out of hours Bleep 1611

## Information needed by the Blood Transfusion Laboratory

- Paediatric major haemorrhage protocol being activated
- Patient identification – Hospital Number, name & date of birth (or trauma patient details)
- Patient location
- Approximate weight of child
- Name and contact details of person activating protocol for ongoing communication
- Cause of bleeding
- How urgently (in minutes) until blood is needed at the bedside
- Group & screen, full blood count & coagulation screen samples being sent –
  - *If difficulty obtaining blood samples ensure 4mL EDTA sample sent for crossmatch as a priority*

## The Blood Transfusion Laboratory will issue -

30ml/kg O negative blood & 30ml/kg FFP

Or

30ml/kg group specific\* units & 30ml/kg FFP (\*if valid sample in Laboratory)

## Once these components are collected from the laboratory:

- A further 30ml/kg blood and 30ml/kg FFP will automatically prepared and made available for issue **UNTIL TOLD TO STOP**

## At this stage consider requesting

- Platelets 15ml/kg (up to 1 pack)
- Cryoprecipitate 5-10ml/kg (up to 10 single-donor units)

Consider Tranexamic Acid

**THE LABORATORY WILL CONTINUE TO ISSUE 30 ml/kg BLOOD AND 30ml/kg FFP AT A TIME WHILST THE PATIENT IS BLEEDING**

**CLINICAL AREA TO ENSURE THE PORTER IS SENT TO COLLECT BLOOD AND BLOOD COMPONENTS**

## Availability of Blood For Collection

Emergency O negative blood  
**Immediate**

Group specific blood if valid sample in the Laboratory  
**10 Minutes**

Group specific blood for unknown patients  
**60 Minutes**

Fresh Frozen Plasma  
**30 minutes to thaw**  
Cryoprecipitate  
**30 minutes to thaw**  
Platelets  
**Immediate if on site**  
Replacement delivery up to 2 hours

## The clinical area will

- **Nominate a Blood Coordinator to ensure blood & blood components are managed effectively**
- Send full blood count & coagulation screen samples as a baseline and hourly thereafter
- Send repeat group & save sample if requested
- Ensure that an emergency Porter is available (if Porter not arrived following 2222 call)
- Ensure the patient's Consultant has been informed (if not already aware)
- Discuss on-going management including authorisation of recombinant clotting factors with the Haematology SpR (contact through Switchboard if contact details not known)
- In massive haemorrhage, actively warm the patient and all transfused fluid
- Inform the Blood Transfusion Laboratory of the patient outcome, destination if moved and when to stand down