Major Blood Loss (MBL) Dicing With Death

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MBL

Thanks to Katy Veale – who first presented
 Dicing with Death at NEQAS seminar on which this is based

MBL Section 1

Question	Dice	Outcome
1. First Contact	1,2	Phone call
	3,4	Sample arrives stating MBL
	5,6	Nurse comes and takes the Emergency O blood

MBL

2. What are your actions / thoughts now?

Question	Dice	Outcome
3.Demeanour of caller	1,2,3	Calm and appears competent
	4,5	Calm but appears a bit lost/ unsure
	6	Panicking

Question	Dice	Outcome
4. Sex of patient	1,2	Male
	3,4,5,6	Female

Question	Dice	Outcome
5. Age of patient	1	5 months old
	2	15 years old
	3	35 years old
	4	49 years old
	5	63 years old
	6	91 years old

If patient is a child assume dice roll 6

Question	Dice	Outcome
6 Type of Haemorrhage	1	A&E Ruptured AAA
	2	A&E Intracranial Bleed on warfarin
	3	Varices GI Bleed
	4	Del – PPH (unless male roll again)
	5	A&E Trauma
	6	Theatres – Bleeding patient

Question	Dice	Outcome
7. Who are you talking to ? Grade of Clinician	1,2,3	Doctor / Anaethetist
	4,5,6	Nurse/ TSW

 8. What are your thoughts on Blood / Blood component requirements for these patient demographics?

Question	Dice	Outcome
9. Historical group	1	No previous sample history Skip to number 12
	2	Only 1 previous sample received – Group A Pos
	3	2 previous samples – Group A Pos
	4	Multiple samples received Group O NEG
	5	Multiple samples received Group B Neg
	6	Multiple sample received Group AB pos

Question	Dice	Outcome
10 Historical Antibodies	1,2,3,4	None
	5	Anti-Fya (+Anti-D if RhD Neg)
	6	Anti-c (unless RhD Neg – roll again)

Question	Dice	Outcome
11. Special Requirements	1,2,3	None
	4	HBs neg
	5,6	Irradiated

If there is no historical group (from question 9)give the response as if dice rolled 6

Question	Dice	Outcome
12. Valid sample available?	1,2	Yes one from earlier today and one from 1 weeks ago
	3,4	Yes – only 1 sample received and processed earlier today
	5	Second sample on analyser will be complete in 20 minutes
	6	No sample

Question	Dice	Outcome
13. MBL protocol activated?	1,2	Yes and emergency blood taken
	3,4	Yes no emergency blood taken
	5,6	Yes and emergency blood given by air ambulance

14. What are your thoughts on Blood / Component requirements and availability? What are your next actions from the above information

15. Would you make any recommendations to the caller at this point?

MBL pack requested

You are still on the phone and the caller is about to request some components. Roll the dice to see what they want

Question	Dice	Outcome
16. Components requested by caller	1	Everything in the fridges. Now!
	2	5 Red Cells , 4 FFP
	3	5 Red Cells, FFP, 1 Platelet 2 Cryo
	4	10 Red Cells , 2 FFP, 2 Platelets
	5	4 Red Cells, 4 FFP
	6	2 Red Cells

- 16 a. Actions and response to request for components.
- Think about how appropriate this request is, what you will issue and what you will tell the requester.

Skip to question 18 if patient has no historical antibodies

Question	Dice	Outcome
17. If the patient has historical antibodies	1,2,3	Antigen negative blood available
	4,5,6	Antigen negative blood NOT available

Question	Dice	Outcome
18. Platelet availabilty	1,2 Stock available	
	3	Platelets issued to another patient
	4	HLA/HPA matched platelets for another patient in incubator
	5,6	NO platelets

Question	Dice	Outcome
19. OBOS working	1,2,3	YES
	4,5,6	NO

 20. What is your response to the dice results above. Think about what (if anything) you would order from NHSBT or what you can do to make sure there is blood/ blood components available to cover this haemorrhage? What delivery method would you use and what are your options if OBOS is unavailable?

Question	Dice	Outcome
21. Sample has been received and is on analyser	1,2	No results yet
A call for more blood is received	3,4	2 Grouping results are now available – Antibody screen still running
	5	2grouping results available and antibody screen neg. Unless historical antibody then roll again
	6	Group authorised antibody screen positive/ Invalid

- 21a What is the significance of these results?
- What are you going to do next?

If Antibody Screen Neg skip straight to question 24

Question	Dice	Outcome
22.If patient has Positive / Invalid antibody screen	1,2	Invalid result
	3,4	Positive screen - Specific antibody detected
	5,6	Positive screen – Panreactive antibody detected

22. What is the significance of these results?

• 23. Would you call anyone to make sure they are aware of these results? If so, who?

 24. You get a phone call asking for another haemorrhage pack. The caller hangs up before you get any details and you can't get hold of anyone to ask what they want. What do you think should be in the second Hemorrhage Pack for the patient at this time?

Haematology Results

Question	Dice	Outcome
25. FBC and Coagulation results	1	Hb=130,Plts=98 Coag normal
	2	Hb=70, Plts =65 Coag Normal
	3	Hb =40, Plt = 222 Coag Normal
	4	Hb = 130, Plts = 98 Coag APTT/INR raised Fibrinogen = 1.6
	5	Hb =70, Plts =65 Coag APTT/INR raised Fibrinogen = 1.0
	6	Hb = 40, Plts = 222 Coag APTT/INR raised Fibrinogen = 0.9

Haematology Results

25a What is the significance of these results?

 25b Should anyone be informed, if so who and how?

 25c What components do you think should be prepared in light of the latest set of results?

Unusual situation / event

Question	Dice	Outcome
26. Unusual situation	1	The LIMS fails and IT cannot give an estimated time for its return!
	2.	The Clinical area call to say they want 2mg of Novoseven
	3.	NHSBT phone t recall a unit of blood that was issued 30 minutes ago
	4.	A call is received from NHSBT saying that their driver is in a minor accident and the blood are stuck
	5.	The ward theaters ring to say that no one is trained on how to use the blood tracking system
	6	A MAJAX is called

Unusual situation / event

• 26a What are the implications of the situaution?

• 26b What actions should be taken?

THE END

 Phew after a long slog, the patient is now doing well and the lab has been stood down.

Well Done.