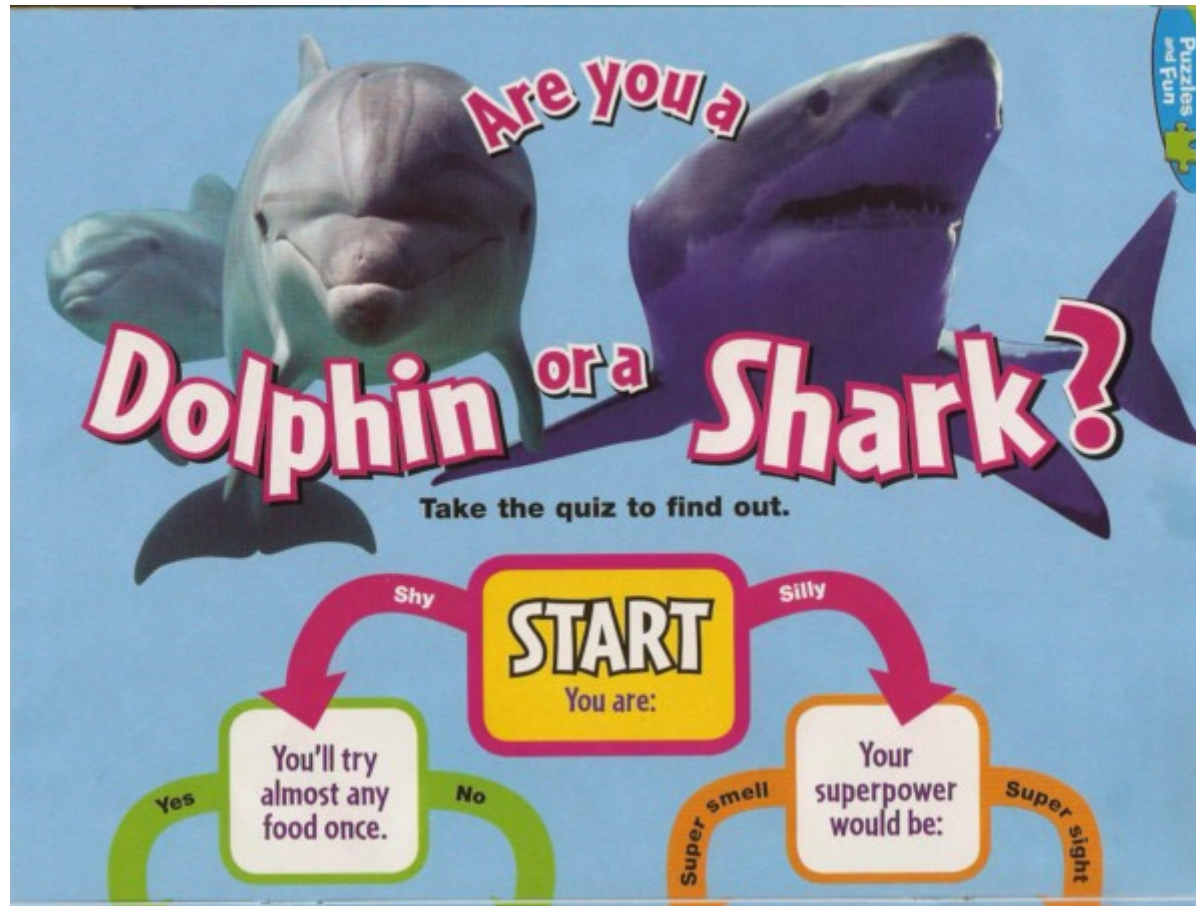


Massive / Major
Blood Loss / Transfusion / Haemorrhage
Protocols / Policies / Guidelines / Procedures
in the SW Region

Patrick Roberts

Background

- Pressure on blood banks from military style protocols
- NPSA/2010/RRR017
 - 2006-2010 11 deaths and 83 incidents of harm related to delay in blood / product provision
 - Recommendations to
 - review local protocols and include actions of all staff involved
 - Enable release of components without haematologist
 - Improve communication
 - Use trigger phrase to activate massive blood loss protocols
 - Investigate delays and report to SHOT
- 2010-12 – a flurry of new protocols
- My plan – to look at what we have all come up with in the region - ?any convergent evolution



Participants

- 11 Protocols
 - Great Western, Weston, North Bristol, Gloucestershire, Cornwall, Bath, UHB, RD&E, Derriford, Taunton, Torbay

- Separate policy? Y 10
 N 1

- Name: Massive Haemorrhage 4
 Major Haemorrhage 4
 Massive Blood Loss 2
 Massive Transfusion 1

(+ 1 trust with both Major Haemorrhage and
Massive Transfusion as 2 policies!)

Definition

- None 4
- 1 BV in 24hr 5
- >10U in 24hr 2
- 4U in 1hr 3
- 50%BV in 3hrs 4
- 150mls/min 2
- >1500ml acute loss 1
- BP <90 / no reponse to fluid 1

Scope

- Any Big Bleed 10
- Trauma only 1

Activation of Policy

- Triggering staff member:
 - Any 4
 - Team leader 1
 - Comm lead 3
 - Lead Dr 2
 - Cons/ Spr 1

Activation of Policy

- Calls to trigger ? 1
 1 5
 2 4
 3+ 1
- Trigger phrase Y 10
 N 1

Code Red 1

I would like to / want to / am.... 6

Trigger phrase not specified 3

Activation of Policy

- Activation call goes to:
 - Blood Bank 1
 - 2222 3
 - Switch 6
 - Switch, Cons Haem, ITU 1
- Dedicated Blood Bank 'Hotline' 2

Contacting the Haematologist

- Immediate by switchboard 2
- Immediate by lab 3
- Immediate by clinical team 3
- Not automatic/ later 2
- Call SpR 1

Blood Products

- | | | | |
|--------------------|------------------------|---|----------------|
| • Rote replacement | Y | 9 | |
| | N | 2 | (“1 Early FFP) |
| • Pack ‘0’ | 4U O Neg/ Gp Sp | 3 | |
| | Unspecified | 6 | |
| • Pack ‘1’ | 6RBC/ 4FFP | 2 | |
| | 6RBC/ 1TDFFP | 1 | |
| | 6RBC/ 4FFP/ 1Pit | 1 | |
| | 6RBC/ 1TDFFP/ 1Pit | 1 | |
| | 6RBC/ 6FFP/ 1Pit | 1 | |
| | 4RBC/ 4FFP | 2 | |
| | 1:1 / 4:4:1 Continuous | 1 | |

Blood Products

- Pack '2'

6 and Check Bld	1
6:4:1	3
4:4:1	2
6:1TD:1:10	1
1:1 / 4:4:1 Cont	1
Not specified	1

When to Give Platelets

- No Mention 1
- Blue light but no trigger given 1
- Per Platelet count 1
- If severe trauma with pack 1 1
- With Pack 1 3
- With Pack 2 4

TXA

- No mention 5
- Yes, Early 4
- Yes, Late 1
- Only in trauma 1

- Dose 1g IV over 10 min then 1 g IV over 8 hours 5
- 1g IV 1

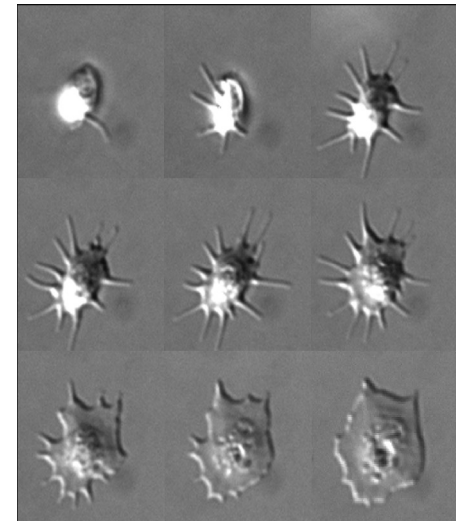


Triggers for FFP/Plts/Cryo

- Triggers given

Y	10
N	1

Platelets	<75	2
	If not >75	5
	<75 or 2ATD <30	
	<80 or 2ATD <30	
	If not >100	



Triggers for FFP/Plts/Cryo

- FFP PTR/APTTR >1.5 3
Not <1.5 4
>Ref range2
Not in Ref 1
- Cryo Fibrinogen <1.0 4
Not >1.0 4
<1.5 2

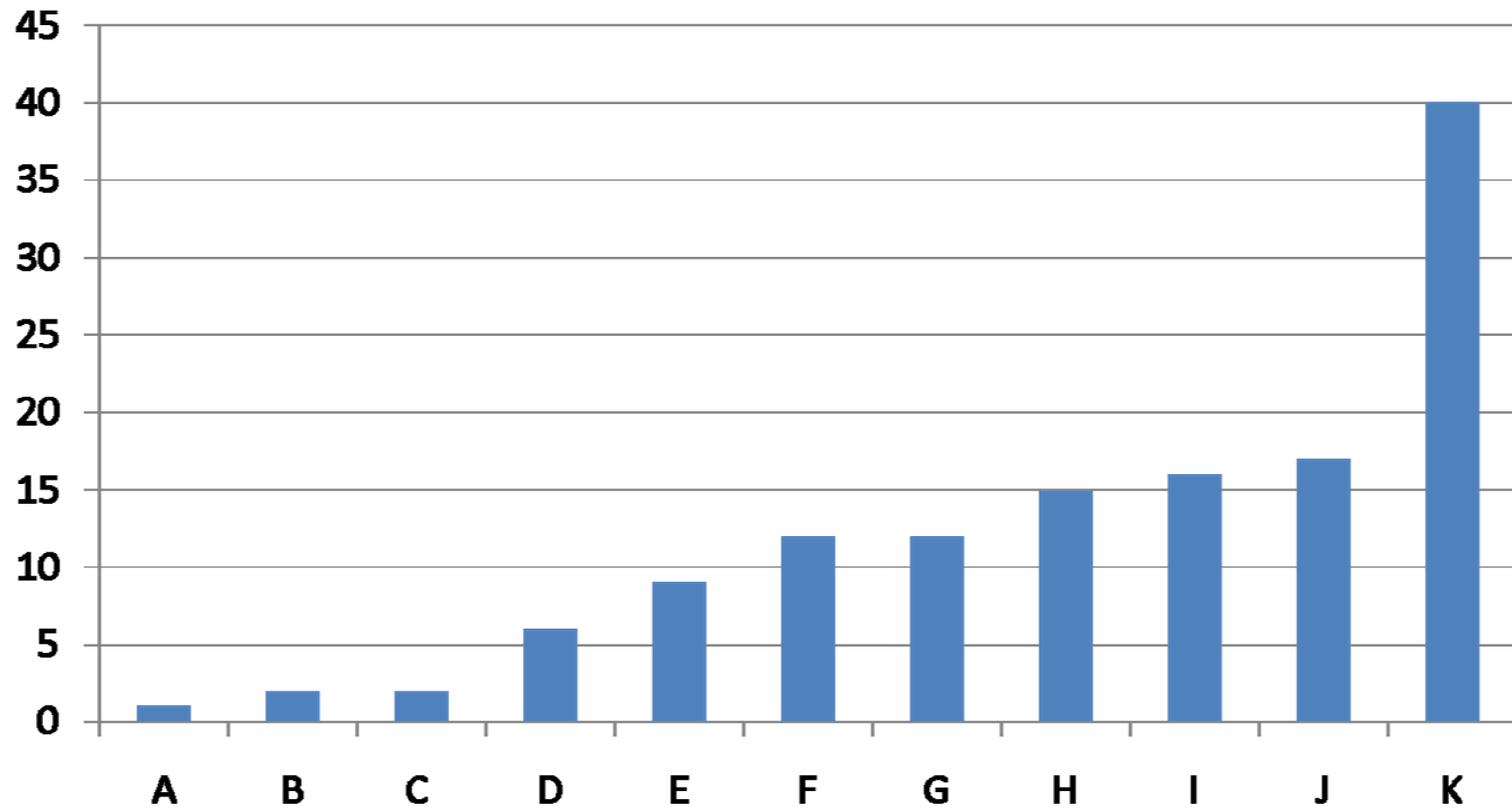
Other products

- POC for major bleed 0/ 11
- rVlla for major bleed No 6
Yes 5
- If rVlla ?Dose 2mg 1
20-50 mcg/ kg 1
100mcg/ kg 1
200mcg/ kg 1

Other measures

- Reversal of anticoagulants 7/ 11
- Anaesthetic/ Surgical measures 9/ 11
- Audit Tool 4/ 11

No. of pages per policy



Awards

- Brevity
- Verbosity
- Profligacy
- Cool

Cornwall

Plymouth

Exeter

Gloucester

Conclusions

- We have very different policies for the same thing!
- Would any of the differences affect outcome?