Critical Bleeding/Major Haemorrhage in Neonates (age<28 days old)

Anticipated or actual blood loss >40mL/kg in 4 hours and haemodynamically unstable
Can be activated prior to birth using Mothers details

Get HELP

Call 55 Code Blue Neonate (if required)
Call 55 Major Haemorrhage Protocol

Alert senior member of clinical team and senior ward nurses

Specify "Neonatal transfusion" when contacting TMU

1x adult size unit of RBC will be prepared
Group O Rh(D) neg, CMV negative, fresh (<7 days old)

Send blood request form to TMU with orderly. Include full name of the neonate, UMRN, Date of birth, gender, maternal UMRN if available, clinical indication and medical details.

55 Major Haemorrhage activates dispatch of orderly to your location to collect Blood request form. Orderly collect blood from TMU and stay with MHP until stood down by senior clinician. 55 MHP also activates page to: **MET team** and **TMU**

If other blood products are required, discuss with haematologist

Assess DRS ABCDE

Stop overt bleeding where possible

IV access

Insert PIVC/UVC. Collect blood samples: Neonatal group and DAT, coagulation, FBP, ABG, Ca+

Give blood

Prescribe on MR640 Blood product transfusion record
Complete consent with parents/guardian on form
"MR 446: Consent to blood products" as soon as possible
Transfuse as per guideline

Transfusion guideline

- **RBC** give 20mL/kg
- Administer over 30 mins (max 150mL/hr)

For activation in ED/Theatres:

- **Consider Emergency Shipper**
- 2xO negative RBC in ED Pathology Room/ Theatre Specimen Room

Prevent coagulopathy

Consider other blood products - PLT, FFP
Discuss with Haematologist
Reassess FBP and coagulation and replace accordingly
Correct hypothermia/hypocalcaemia

Transfusion guideline

- **FFP** give 15mL/kg administer over 30-60 mins
- **PLT** give 10mL/kg administer over 15-30 mins

Aim

- Patient Temp >36.5°C
- pH>7.2
- Ionised calcium >1mmol/L
- Platelets > 50 x 10^9/L
- Fibrinogen>2g/L
- APTT/PT <1.5 times normal

Maintain stability

Repeat FBP, Coagulation and ABG after transfusion.
Monitor HR, BP, capillary refill, saturation, temperature, urine output.

Stand down

Call TMU x28005. Return all unused blood products to TMU.
Inform TMU if blood products have been warmed (out of cold chain - not suitable for re-use). Stand down Orderly

Reassess **ABCDE** and clinical parameters regularly. Document observations and time blood products started/ finished.

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