

# Transfusion Management of Major Haemorrhage (Paediatric)



**Activation Telephone Number**  
**LIH, Oban Dial:2222**

**Emergency O -ve Re Cell**  
**Location:**  
**Theatre Blood Fridge, 4 units**

**Estimated time to receive blood:**

- O -ve: immediate
- Full X-match:50 mins (plus travelling time for BMS)

**Continuously monitor patient:**

- SaO<sub>2</sub>, BP, HR, ECG, RR
- Monitor signs of shock: urine output, conscious level, capillary return, cool peripheries
- Document vital signs

**Prevent Hypothermia**

- Use fluid warming device
- Use forced air warming blanket

**Monitor/treat Hyperkalaemia**  
CaCl<sub>2</sub> dextrose + insulin, B2 agonists, HCO<sub>2</sub>

**Monitor/treat Hypocalcaemia**  
CaCl<sub>2</sub> dextrose + insulin, B2 agonists, HCO<sub>2</sub>

**Monitor/treat Acidosis**  
Maintain intravascular volume, monitor renal function, avoid hypoglycaemia

**Monitor/treat volume overload**

**Be aware: electrolytes change quickly in paediatric patients**

**Targets for Therapy:**

Hb	70 to 90g/l
Platelets	>50 x 10 <sup>9</sup> /l
PT ratio	<1.5
APTT ratio	<1.5
Fibrinogen	>1g/l
Ca 2+	>1 mmol/l
Temp	>36° C
pH	>7.35 on ABG

**monitor for hyperkalaemia**

