



GUIDELINE

Critical Bleeding Protocol – Neonatal

Scope (Staff):	Nursing and Medical Staff
Scope (Area):	NICU KEMH, NICU PCH, NETS WA

Child Safe Organisation Statement of Commitment

CAHS commits to being a child safe organisation by applying the National Principles for Child Safe Organisations. This is a commitment to a strong culture supported by robust policies and procedures to reduce the likelihood of harm to children and young people.

This document should be read in conjunction with this [disclaimer](#)

Please see the next page for Critical Bleeding Protocol


Related policies, procedures and guidelines

Neonatology [Blood components and Blood Products \(health.wa.gov.au\)](http://health.wa.gov.au)

CAHS TMU - [Critical Bleed / Major Haemorrhage Management \(health.wa.gov.au\)](http://health.wa.gov.au)

WNHS [KEMH Transfusion Medicine Department HealthPoint site](#)

This document can be made available in alternative formats on request.

Document Owner:	Neonatology		
Reviewer / Team:	Neonatology / Transfusion Medicine/QEII		
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Amendment Dates:		Next Review Date:	January 2028
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Endorsed by:	Neonatal Coordinating Group		
Standards Applicable:	NSQHS Standards:  Child Safe Standards: 1,10		

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Healthy kids, healthy communities

Compassion

Excellence

Collaboration

Accountability

Equity

Respect

Neonatology | Community Health | Mental Health | Perth Children's Hospital

Neonatal Critical Bleeding Protocol (CBP)

Only to be used at KEMH Neonatal Unit

ACTIVATE CRITICAL BLEEDING PROTOCOL

Activating a CBP alerts TMU to the need for urgent blood products, potentially in large volumes. Consultant/SR to state "I am activating the Critical Bleeding Protocol".

Delegate a staff member to notify TMU of the baby's details, location, Dr activating the CBP, and confirm this has occurred.

SAMPLES (hand deliver to TMU urgently):

- Crossmatch (PINK TUBE) - HANDWRITTEN label. Ensure all details added
- Coagulation profile | FBC

IF BLOOD is required in <15 minutes

request 1 unit of O RhD Negative Packed Red Blood Cells from TMU

DO NOT TAKE BLOOD FROM THE THEATRE SATELLITE FRIDGE UNLESS THE BABY IS BEING RESUSCITATED IN THEATRE OR LABOUR WARD

Initially give Packed Red Blood Cells 20mL/kg.

Other blood products may be indicated based on haematology results.

FFP 15mL/kg | Cryoprecipitate 5mL/kg | Platelets 10-15mL/kg

Repeat Coagulation Profile and FBC as indicated

Continue until hemodynamically stable

NOTIFY TMU TO STOP CBP

Contact Transfusion Medicine (TMU)

KEMH: 6458 2748

Aim For

- Temp $>36^{\circ}\text{C}$
- pH $>7.2\text{mmol/L}$
- Normocapnia
- BE above -6
- Lactate $<4\text{mmol/L}$
- $\text{Ca}^{2+} >1.1\text{mmol/L}$ (Use Ca Gluconate 10%, 0.5mL/kg)
- Platelets $>50 \times 10^9/\text{L}$
- PT/APTT $<1.5 \times \text{normal}$
- INR $<1.5 - 1.8$
- Fibrinogen $>2\text{g/L}$

Optimise

- IV access (UVC/2nd PIVC)
- Oxygenation
- Cardiac output
- Temperature
- Metabolic state

Consider

- Arterial line
- Blood warmer

Pack / Unit volumes

PRBC = 60mL/unit | CRYO = 35mL/pack
PLT = 178mL/pack | FFP = 70mL/pack

3B Neonatal Critical Bleeding Protocol (CBP) **Only for use at 3B Neonatal Unit**

ACTIVATE CRITICAL BLEEDING PROTOCOL

Activating a CBP alerts TMU to the need for urgent blood products, potentially in large volumes. Consultant/SR to state **"I am activating the Critical Bleeding Protocol"**.

Delegate a staff member to notify TMU of the baby's details, location, Dr activating the CBP, and confirm this has occurred.

Contact Transfusion Medicine (TMU)

PCH: Vocera 'Transfusion Medicine'

0429 128 316 | 6383 4015

SAMPLES (deliver to TMU via PTS urgently):

- Crossmatch (PINK TUBE) – Can have addressograph sticker but must have date/time and signed by collector
- Coagulation profile | FBC

Aim For

- Temp $>36^{\circ}\text{C}$
- pH $>7.2\text{mmol/L}$
- Normocapnia
- BE above -6
- Lactate $<4\text{mmol/L}$
- $\text{Ca}^{2+} >1.1\text{mmol/L}$ (Use Ca Gluconate 10%, 0.5mL/kg)
- Platelets $>50 \times 10^9/\text{L}$
- PT/APTT $<1.5 \times \text{normal}$
- INR $<1.5 - 1.8$
- Fibrinogen $>2\text{g/L}$

IF BLOOD is required in <15 minutes request 1 unit of O RhD Negative Packed Red Blood Cells (PRBC) from TMU

CRITICAL RESUSCITATION EVENTS - There are 2 uncrossmatched O RhD Negative irradiated PRBC units in the PCC Satellite blood fridge.

Optimise

- IV access (UVC/2nd PIVC)
- Oxygenation
- Cardiac output
- Temperature
- Metabolic state

Consider

- Arterial line
- Blood warmer
- rFVIIa – discuss with Haematologist

CRITICAL BLEED PACK 1

PRBC - give 20mL/kg
Cryoprecipitate - give 5mL/kg

CRITICAL BLEED PACK 2

PRBC - give 20mL/kg
FFP - give 15mL/kg
PLATELETS - give 10-15mL/kg

Alternate Packs 1 & 2.

Repeat Coagulation Profile and FBC after each pack as indicated

Continue until hemodynamically stable

NOTIFY TMU TO STOP CBP

Pack / Unit volumes

PRBC = 60mL/unit | CRYO = 35mL/pack
PLT = 178mL/pack | FFP = 70mL/pack