ADULT MASSIVE TRANSFUSION PROTOCOL (MTP)

Applicable to: MidCentral Health

Issued by: Clinical Haematology

Contact: Emergency Department, PNH

1. PROTOCOL ACTIVATION CRITERIA

The massive transfusion protocol must be activated for a specific patient when the patient has been assessed as requiring the protocol for massive and rapid bleeding by an experienced medical practitioner.

2. CLINICAL GUIDELINE

2.1 Blood bank should be notified immediately of MTP activation.

2.3 Obtain 4 units of O Neg red cells from theatre or blood bank when type specific or fully compatible red cells not yet available.

2.4 Each MTP pack will be made ready for issue upon release of the preceding pack but will only be issued on request.

2.5 To avoid any delay in receiving the required units of blood products an orderly needs be assigned specifically to this role.

2.6 On receipt of each MTP pack or every 30mins a coagulation screen MTP bloods should be requested.

2.7 Consider the use of Tranexamic acid. Reverse anticoagulation. Additional products may be required if coagulation profiles become abnormal. Contact on call haematologist for advise if needed.

2.8 Blood Bank MUST be informed when the MTP is ceased.

3. APPENDICES

A: MidCentral DHB Adult Massive Transfusion Protocol (MTP) Flow Diagram

4. KEYWORDS

MTP, Massive Transfusion, Bleeding, Trauma, Abnormal coagulation, Shock, Haemorrhage
**Consider Tranexamic acid**

1g IV over 10min.
Then follow with 1g over 8 hours, in 500ml 0.9% sodium chloride.
Or 1g IV 8 hourly.