

IMPORTANT CONTACT NUMBERS

BLOOD BANK: Ext. 24064 | NURSING SUPERVISOR: Ext. 25056 | SURGERY (MAIN): Ext. 22293

Massive Transfusion Protocol

Physician notifies the primary RN of the need to activate the Massive Transfusion Protocol.
(Order Blood Transfusion - Massive Transfusion in Cerner)

The charge nurse will immediately notify blood bank of the activation and provide the patient's name & MR number.

TRAUMA: Consider Tranexamic acid 1gram/100ml
Normal Saline IV over 10 mins (100mg/min) via infusion
pump w/in 3 hrs of injury, followed by maintenance dose
1gram/500ml over 8 hr

OBSTETRICS: Cryoprecipitate 2 adult dose units
IV (1 adult dose =5 units random donor) given
after initial 6 u RBCs + 6 u FFP + 1 Platelet Pheresis

Effective blood-warming measures should be implemented during transfusion of blood products.
Transfusion of platelets and cryoprecipitate should not be warmed. It is imperative to alternate blood
products to maintain at 1:1:1 ratio during transfusion. (3 u PRBCs + 2 u FFP + 1 platelet pheresis= 1:1:1)

BB coordinates
with Red Cross to
ensure sufficient
products are
available

Blood Bank anticipates release of 6u RBCs + 6 u FFP + 1 Platelet
pheresis (uncrossmatched if indicated)

Pack #1 immediate release of 3 u RBCs + 4 u FFP + 1 Platelet
Pheresis (Platelets kept at room temp)
Blood bank will begin thawing the remaining 4 u FFP
(expectation thawed and available within 30 minutes)

Type & Cross
ASAP

SEE OTHER SIDE

Pack #2 releases 3 u PRBCs + 4 units FFP
(will complete MTP #1 for total 6:6:1)

Pack #3 releases 3u RBCs + 3u FFP + 1 Platelet Pheresis
(Platelets kept at room temp)
Cryoprecipitate 2 adults dose units (Obstetrical Hemorrhage Only)

Every
30-60 mins

Pack #4 releases 3 u PRBCs + 3 units FFP

Monitor for Hemostasis
& resolution of coagulopathy

Yes

Stop MTP

- MD or designee notifies Blood Bank
- Return any unused products ASAP
- Resume standard ordering practices
- Need order to stop MTP, verified verbally or by computer

M-2749 (06.22)

Lab Studies

Hemoglobin,
hematocrit,
platelet, PT,
PTT, INR,
ionized calcium,
fibrinogen and
TEG if available.

Blood bank will continue to
release MTP packs containing 3 u
RBCs + 3 u FFP + Platelet Pheresis
until the MTP is terminated by
attending physician.

Once laboratory data are
available, resuscitation should
be goal directed based on the
laboratory findings and clinical
evidence of ongoing bleeding.

RETURN COOLERS TO BLOOD BANK AS
SOON AS THEY ARE EMPTIED