**Pre-Printed Orders:**

**Massive Hemorrhage Protocol (Adult)**

**Massive Bleeding Specify:**
- [ ] Trauma
- [ ] Surgical
- [ ] Obstetrical
- [ ] Medical
- [ ] Other: ________________

### Weight: ____________

**Baseline Bloodwork**
- [ ] MHP bloodwork (CBC, INR/PTT, Fibrinogen, Electrolytes, Creatinine, Mg++, Ionized Ca++, serum lactate, Group and Screen, Blood Gas)
- [ ] Other (specify): ________________

### Fluid Resuscitation (*Warm all fluids)*:
- [ ] Specify: ________________

**Blood Components/Products (*Warm all components)*:**
- [ ] RBC _____ units
- [ ] Platelets _____ units
- [ ] Plasma _____ mLs
- [ ] Cryoprecipitate _____ units
- [ ] Other specify: ________________
- [ ] rFVIIa _____ mg IV Direct (*Given as last resort; assess risk/benefit*)

**Anticoagulant Reversal:**

**For oral vitamin K₁ antagonists** (e.g. warfarin) **INR result:** ______
- [ ] PCC _____ mLs/_____ International Units. (See product monographs for dose).
- [ ] Vitamin K₁ 10 mg IV

**Heparin reversal**
- [ ] Protamine 1 mg IV for every 100 units of heparin

**Antifibrinolytics**
- [ ] Tranexamic Acid 1 gm IV over 10 minutes followed by 1 gm IV over 8 hours
- [ ] DDAVP _____ mcg IV (maximum dose 20mcg)

**Direct thrombin inhibitors/direct factor Xa inhibitors** (e.g. Apixaban/Dabigatran/Rivaroxaban)
- [ ] **No known antidote; treat symptomatically**

**Reassess:**
- [ ] Repeat MHP bloodwork every _____ minutes until Protocol discontinued.
- [ ] Other bloodwork (specify): ________________
- [ ] See physician orders for further transfusion orders and medication orders

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**Physician Name:** ____________________________ **Date:** YYYY/MONTH/DD  **Time:** ______
**Physician Signature:** ____________________________

**Nurse’s Name:** ____________________________ **Date:** YYYY/MONTH/DD  **Time:** ______
**Nurse’s Signature:** ____________________________

**Nurse’s Name:** ____________________________ **Date:** YYYY/MONTH/DD  **Time:** ______
**Nurse’s Signature:** ____________________________

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**NL-MHP001 Effective Date:** 2014-09-02