**Pediatric Massive Transfusion Protocol**

**ACTIVATE PEDIATRIC MTP**
1. **Order, Initiate, and Sign** Pediatric MTP PowerPlan
2. **Notify Blood Bank** with the following:
   - Patient Name, MRN, and Location
   - Estimated Weight
   - Attending Physician
   - Point of Contact Name and Contact Number

**INITIAL LABS IN MTP PowerPlan:**
- Type and Screen
- ABG
- iCa
- EHP (H/H, Plt, PT/INR, Fibrinogen)
- 1 lavender and 1 light blue tube

**REPEAT LABS:**
Every 30 minutes during MTP:
- EHP (H&H, Plt, PT/INR, Fibrinogen)
- As clinically indicated: ABG, iCa, Chem7

**BLOOD BANK PREPARES MTP PRODUCTS BY PATIENT WEIGHT**

| Weight Range | RBC Units | Plasma Units | Apheresis Platelet
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<tbody>
<tr>
<td>&lt;20 kg</td>
<td>2</td>
<td>2</td>
<td>1 (alternating rounds)</td>
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<tr>
<td>20 - 50 kg</td>
<td>4</td>
<td>4</td>
<td>1 (alternating rounds)</td>
</tr>
<tr>
<td>&gt;50 kg</td>
<td>6</td>
<td>6</td>
<td>1 (all rounds)</td>
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</tbody>
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- Transfusions < 1 unit: may draw multiple transfusions from 1 unit with sterile syringe/technique

**TRANSFUSE PRODUCTS**
- Consider **TXA**: 15 mg/kg bolus over 10 min, then 2 mg/kg/hr over 8 hrs (max 1gm each time)
- 15 mL/kg each **RBCs: Plasma: Platelets** (1:1:1 ratio)
- Reassess ongoing need for MTP products

**RETURN UNUSED PRODUCTS TO BLOOD BANK**
- Return cooler/Refrigerator on Wheels (ROW) to blood bank with all unused products.
- Do NOT put platelets or cryo in coolers or ROW

**RETREIVE ROUND FROM BLOOD BANK**
- Clinical team **must** pick up products from blood bank
- Next round prepared when clinical team picks up prepared products

**PROTOCOL DISCONTINUED**
Discontinued by clinical team
*Notify Blood Bank of discontinuation*

**IMPORTANT TO REMEMBER:**
* Cryo is not included in the Pediatric MTP order set - order separately based on lab results.
* Notify the Blood Bank for ALL changes to patient location or Contact Person (272-2591).
* Do not put platelets or cryo in the coolers or ROW.
* EHP specimens must be HAND DELIVERED to lab.
Pediatric Massive Transfusion: Protocol Indications

Actively Bleeding Patient

Suggested Indications to activate MTP:

Continued significant bleeding in the presence of:
- INR > 1.9
- Fibrinogen <160 mg/dL
- Thrombocytopenia with:
  - < 50,000 without intracranial/intraocular hemorrhage
  - < 100,000 with intracranial/intraocular hemorrhage

Ultimately- The decision to activate the MTP is up to the clinical judgement of treating physician

Already transfused ≥ 40 mL/kg RBCs

Large blood loss and symptomatic hemorrhagic shock

BLOOD BANK Notification:
272-2591
333 (in-house phone)
272-3333
925-3333

Title: Pediatric Massive Transfusion Protocol Flowchart
Effective Date:
Applicability: UNM University Hospital Pediatric Patients
Document Owner: Transfusion Medicine
Related Documents: Pediatric Massive Transfusion Protocol (MTP) Procedure and Information

Title: Pediatric Massive Transfusion Protocol Procedure and Information – Revised
Owner: Department of Pathology, Transfusion Medicine Attending Physician Office: 505-272-4560
Effective Date: