

# Obstetric Haemorrhage Guide

>500ml blood loss in delivery room (>1L in theatre)

Get **HELP**

**Inform:**

Labour Ward coordinator,  
Obstetric and Anaesthetic teams

Wide bore IV access  
Bloods: G&S, FBC, Clotting  
1 g Tranexamic acid IV

Identify **cause**  
PPH: tone/tissue/trauma/thrombin  
APH: ?abruption

Measure and record blood loss  
Monitor observations every 15 mins

**Tone:**  
Uterine massage  
Uterotonics  
(as per guideline)  
Empty bladder

**Trauma:**  
Inspect and repair  
genital tract

**Tissue:**  
Check placenta  
delivered and intact?

**APH:**  
?urgent delivery

Bleeding controlled?

NO

>1000ml loss (> 1500ml in theatre) or signs of shock

Obstetric and Anaesthetic teams in attendance  
Continue to measure and record blood loss  
Lie patient flat  
(manual uterine displacement if APH)

2<sup>nd</sup> IV access  
Rapid IV fluid infusion  
TEG and Hb (hemocue or blood gas)  
Request urgent crossmatch 4 units of blood  
1 g Tranexamic acid IV (if not already)

Review **cause** of bleeding

**Tone:**  
Further uterotonics as per guideline  
Bimanual compression

Consider need for surgical intervention  
EUA/removal of retained placenta/repair of trauma  
? delivery in APH

Bleeding controlled?

YES

Post Haemorrhage  
Care Plan

NO

Massive Obstetric Haemorrhage Guide