Appendix FF: Obstetric Hemorrhage Sample Order Set Staged

Note: This is a SAMPLE developed for a particular facility as an example to work from. You may need to adjust based on the individual circumstances of your facility.

**POSTPARTUM HEMORRHAGE ORDER-SET** (Procedure #0000)
Boxes must be checked to activate optional orders.

**Medications:**

- **Oxytocin in saline (PITOCIN)** 30 units/500 mL (60 milli-units/mL) infusion
  0-999 milli-units/min (0-999 mL/hr), at 0-999 mL/hr, Intravenous, TITRATED
- **Oxytocin (PITOCIN)** injection 10 units IM
- **Methylergonovine (Methergine)** injection 0.2 mg, Intramuscular, PRN, Bleeding, if BP < 140/90, may repeat x 1. May give only after delivery. **Consult provider if patient is hypertensive.**
- **Carboprost (Hemabate)** injection 250 mcg, Intramuscular, EVERY 15 MIN PRN, Post-partum hemorrhage, may give only after delivery. May repeat every 15-90 minutes. Not to exceed 3 doses. **Do not give if history of asthma.**
  
  *Give 4 mg of loperamide with first dose of carboprost.*

  - **Loperamide (IMODIUM)** capsule 2-4 mg, Oral, PRN, Diarrhea
    May give only after delivery. Give 4mg with 1st dose of carboprost (HEMABATE), then 2 mg PRN after each loose stool up to a maximum of 16 mg/day (do not give stool softeners or laxatives until diarrhea is resolved).

  - **Misoprostol (Cytotec)** 800 mcg (four 200 mcg tablets) sublingual x 1 dose. **Only if hypertensive and asthmatic**

**Stage 1**

1. **Nursing Orders:**
   - Activate the OB Hemorrhage Protocol
   - Notify OB Provider, Anesthesia Provider, and Charge Nurse
   - Vital signs, including SpO2, level of consciousness every 5 minutes
   - Administer oxygen to maintain SpO2 greater than 95%
   - Weight materials, calculate and record cumulative blood loss every 5-15 minutes
   - Establish IV access if not present- minimum 18 gauge
   - Increase oxytocin administration rate
   - Administer 1st level uterotonic
   - Apply vigorous fundal massage
   - Empty bladder straight cath or place indwelling urinary catheter

2. **Stat Labs:**
   - **Type and Screen STAT,** if not previously done

3. **Blood Bank:**
   - **Cross match ____ units PRBC (Packed Red Blood Cells) STAT** if not already done

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### Stage 2

1. **Nursing Orders:**
   - Activate OB Rapid Response Team (or equivalent)
   - Assess and announce vital signs and cumulative blood loss every 5-10 minutes
   - Administer oxygen to maintain SpO2 greater than 95%
   - Weight materials, calculate and record cumulative blood loss every 5-15 minutes
   - Administer 2nd level uterotonic
   - Move to Operating Room
   - Establish second large bore IV – minimum 18 gauge
   - Administer TXA
   - Set up blood administration set and blood warmer for transfusion
   - Prepare intrauterine device
   - Transfuse red blood cells as ordered

2. **Labs:**
   - □ Type and Screen STAT if not previously done
   - □ CBC no differential, STAT
   - □ Protime INR, STAT
   - □ PTT, STAT
   - □ Fibrinogen, STAT
   - □ Calcium, Ionized, STAT
   - □ Basic Metabolic panel STAT
   - □ ABGs

### Stage 3

1. **Nursing Orders:**
   - Activate Massive Hemorrhage Protocol
   - Notify Blood Bank of “Massive Hemorrhage Protocol”
   - Ensure that all clinicians from Stage 2 are notified plus advanced GYN surgeons
   - Run IVs through fluid warmer
   - Apply upper body warming blanket
   - Apply sequential compression stockings to lower extremities
   - Transfuse MTP Product as directed by the ordering Provider

2. **Labs:**
   - □ Type and Screen STAT if not previously done
   - □ CBC no Differential STAT
   - □ Protime INR STAT
   - □ Fibrinogen
   - □ Calcium, Ionized Calcium STAT
   - □ Basic Metabolic panel STAT
   - □ ABGs
   - Hourly Labs x 4

3. **Blood Bank:**
   - □ Massive Transfusion Protocol (6R: 4F: 1P)
   - □ Red Blood Cells - Prepare STAT, ONE TIME, Total Number of Units: 6
   - □ Fresh Frozen Plasma - Prepare Total Number of Units: 4
   - □ Platelets - Prepare Total Number of Units: 1