

OB Postpartum Hemorrhage [1900]

Orders for non-emergency transfusions to adult patients

General [2998]

Consent

- Verify informed consent for transfusion [NUR542]** Routine, Once For 1 Occurrences, Blood Product Administration

Nursing [105163]

Vital Signs

- Vital signs for transfusion [NUR490]** Routine, Per unit protocol, Check vital signs immediately prior to starting transfusion, 15 minutes after the start of infusion, every hour during the infusion of the blood, and one hour after infusion is complete. Then revert to previous routine.
- Vital Signs per transfusion protocol [NUR490]** Routine, Per unit protocol, Per transfusion protocol. Revert to previous routine after transfusion completed.
- Vital signs during transfusion specified in order comments [NUR490]** Routine, Per unit protocol, Vital signs during transfusion ***. Revert to previous routine after transfusion completed.

Nursing Interventions

- Give Patient/Family Transfusion Information Brochure [NUR496]** Once For 1 Occurrences
- Continuous pulse oximetry [NUR586]** Routine, Until discontinued, Starting today, Keep SpO2 greater than 95, Postpartum
- Strict intake and output [NUR618]** Routine, Every 1 hour For 72 Hours, Postpartum
- Vital Signs [NUR490]**
Routine, Per unit protocol, Blood pressure, pulse, respirations, temperature, pain assessment.
Now and then q 5 minutes until stable. And then q 1 hour x 4 hours, then per unit routine., Postpartum
- Peri-Care [NUR185]**
Until discontinued, Starting today
Peri-care; Strict pad count, Postpartum
- Insert peripheral IV [IVT3]**
STAT, Continuous
Establish 2nd large bore IV, Postpartum
- Insert Indwelling Urinary Catheter [NUR380]**
Routine, Once For 1 Occurrences
Indication: Need for continuous accurate urine output and renal function that drives medical therapy
Connect to straight drain.
Caution: Risk for infection and/or bleeding. Avoid if possible in patients on THROMBOCYTOPENIA/BLEEDING and/or NEUTROPENIC precautions., Postpartum
- Catheter care [NUR375]** Routine, Every shift, Postpartum
- Discontinue Indwelling Urinary Catheter [NUR378]**
Routine, Once
Consider placing Bladder Scan order upon discontinuing indwelling urinary catheter, Postpartum
- In-and-out catheterization [NUR385]** Routine, Once For 1 Occurrences
- Weigh blood loss [NUR493]** Routine, Until discontinued, Starting today, Postpartum
- Notify physician (specify) [NUR183]**
Until discontinued, Starting today
Call OB provider and anesthesiologist for the following: unresponsive patient, unstable vital signs including O2 saturation less than 95%, return to OR, Postpartum
- Intrauterine Balloon Insertion [3049999918]**

- Intrauterine Balloon Tamponade Insertion [PRO160]**
Routine, Once
Insert: Bakri Postpartum Balloon. Indicator: Postpartum uterine bleeding. Connect to urometer, Postpartum
- sodium chloride (NS) 0.9 % irrigation solution [11403]** irrigation, Continuous, For 30 Days, Postpartum
- Insert Indwelling Urinary Catheter [NUR380]**
Routine, Once For 1 Occurrences
Indication:
Postpartum
- Vaginal packing [NUR185]** Once For 1 Occurrences, Postpartum
- Nursing communication [NUR185]**
Until discontinued, Starting today
Fundal massage every 15 minutes, Postpartum
- Nursing communication [NUR185]**
Until discontinued, Starting today
Weigh materials, calculate and record cumulative blood loss every 15 minutes, Postpartum
- Apply warming blanket [NUR610]** Routine, Until discontinued, Starting today, Apply upper body warming blanket if feasible, Postpartum
- Nursing communication [NUR185]**
Until discontinued, Starting today
Announce vital signs and cumulative blood loss q5-10 minutes, Postpartum
- Nursing communication [NUR185]**
Until discontinued, Starting today
Use fluid warmer and/or rapid infuser for fluid/blood products if available, Postpartum

Labs [5972]**Hematology**

- CBC [LAB294]**
STAT, STAT, Starting today For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Blood, Postpartum
- Platelet count [LAB301]**
STAT, STAT, Starting today For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Blood, Postpartum
- Protime-INR [LAB320]**
STAT, STAT, Starting today For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Blood, Postpartum
- aPTT [LAB325]**
STAT, STAT, Starting today For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Blood, Postpartum
- Fibrinogen [LAB314]**
Routine, STAT, Starting today For 1 Occurrences
Release to patient: Immediate
Blood, Postpartum

- TEG Profile [LAB1122]**
STAT, STAT For 1 Occurrences
Release to patient: Immediate
Blood, Postpartum

Blood Bank Tests - Type and Screen Required [103771]

Default Phase of Care: Postpartum

- ABO/Rh [LAB895]** Routine, Once
- Antibody screen [LAB278]** Routine, Once
- Type and screen [LAB276]** Routine, Once

Pre-Transfusion Labs [8669]

Default Phase of Care: Postpartum

- CBC [LAB294]**
Routine, Once For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Prior to transfusion., Blood
- Hemoglobin and hematocrit [LAB753]**
Routine, Once For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Prior to transfusion., Blood
- Anti Xa-Heparin [LAB8588]**
Routine, Once For 1 Occurrences
Release to patient: Immediate
Prior to transfusion., Blood
- Fibrinogen [LAB314]**
Routine, Once For 1 Occurrences
Release to patient: Immediate
Prior to transfusion., Blood
- DIC profile [LAB2314]**
Routine, Once For 1 Occurrences
Release to patient: Immediate
Prior to transfusion., Blood
- Prottime-INR [LAB320]**
Routine, Once For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Prior to transfusion., Blood
- aPTT [LAB325]**
Routine, Once For 1 Occurrences
Expected Date (Labcorp/Quest):
Release to patient: Immediate
Prior to transfusion., Blood
- Sickle cell screen [LAB339]**
Routine, Once For 1 Occurrences
Release to patient: Immediate
Prior to transfusion, Blood

Post-Transfusion Labs [8670]

Default Phase of Care: On Unit

Hemoglobin and hematocrit [LAB753]

Routine, Once For 1 Occurrences
 Expected Date (Labcorp/Quest):
 Release to patient: Immediate
 After transfusion completed., Blood

 Platelet count [LAB301]

Routine, Once For 1 Occurrences
 Expected Date (Labcorp/Quest):
 Release to patient: Immediate
 After transfusion completed., Blood

 Prottime-INR [LAB320]

Routine, Once For 1 Occurrences
 Expected Date (Labcorp/Quest):
 Release to patient: Immediate
 After transfusion completed., Blood

 aPTT [LAB325]

Routine, Once For 1 Occurrences
 Expected Date (Labcorp/Quest):
 Release to patient: Immediate
 After transfusion completed., Blood

Fluid and Electrolytes [6056]**Fluids for Transfusion Setup [408106793]**

Default Phase of Care: Postpartum

 sodium chloride 0.9% 100 mL [27838]

100 mL, intravenous, at 0-20, Once, For 1 Doses
 Run at KVO. For blood product transfusion setup

 sodium chloride 0.9% 500 mL [27838]

500 mL, intravenous, at 0-20, Once, For 1 Doses
 Run at KVO. For blood product transfusion setup

 sodium chloride 0.9% 1000 mL [27838]

1,000 mL, intravenous, at 0-20, Once, For 1 Doses
 Run at KVO. For blood product transfusion setup

Medications [5985]**Medications for Transfusion [408106792]**

Default Phase of Care: Postpartum

 furosemide (LASIX) tablet [3294]

40 mg, oral, Once, For 1 Doses
 For blood product administration
 Hold for:

 furosemide (LASIX) injection [420038]

intravenous, Once, For 1 Doses
 For blood product administration.

 diphenhydrAMINE (BENADRYL) oral [189138]

25 mg, oral, Once, For 1 Doses
 For blood product administration

 diphenhydrAMINE (BENADRYL) IV [420208]

intravenous, Once, For 1 Doses
 For blood product administration

 acetaminophen (TYLENOL) 650 mg oral [101]


650 mg, oral, Once, For 1 Doses
 For blood product administration

- acetaminophen (TYLENOL) 650 mg rectal [105]**
650 mg, rectal, Once, For 1 Doses
For blood product administration
- hydrocortisone sodium succinate (Solu-CORTEF) 50 mg IV [420214]**
50 mg, intravenous, Once, For 1 Doses
For blood product administration

Hemorrhage Medications [3049999919]

Default Phase of Care: Postpartum

- oxytocin (PITOCIN) infusion in NS 30 units/500 mL [408400009]**
0-60 Units/hr, intravenous, Continuous PRN, for postpartum hemorrhage
For postpartum hemorrhage: Infuse initial rate at 60 units/hr or 999 mL/hr over 15 minutes then 7.5 units/hr or 125 mL/hr. Discontinue when uterine tone is firm and vaginal bleeding is small to moderate.
- oxytocin (PITOCIN) injection [5944]** 10 Units, intramuscular, Once as needed, For postpartum hemorrhage, For 1 Doses
- miSOPROStol (CYTOTEK) [408107128] (Selection Required)**
miSOPROStol (CYTOTEK) tablet [10628]
800 mcg, rectal, Once as needed, postpartum hemorrhage, For 1 Doses
Use rectal route for post vaginal delivery or if patient is vomiting.

 Or
miSOPROStol (CYTOTEK) tablet [10628]
800 mcg, buccal, Once as needed, postpartum hemorrhage, For 1 Doses
Use buccal route for post cesarean section or if rectal route is contraindicated.
- carboprost (HEMABATE) injection [9413]**
250 mcg, intramuscular, Once as needed, postpartum hemorrhage, For 1 Doses
Refrigerate. Use caution in patients with asthma.
- methylergonovine (METHERGINE) injection [10571]**
200 mcg, intramuscular, Once as needed, postpartum hemorrhage, For 1 Doses
Refrigerate. Use caution in patients with hypertension.
- methylergonovine (METHERGINE) tablet [10572]** 200 mcg, oral, Every 8 hours, For 3 Doses
- tranexamic acid (CYCLOKAPRON) IVPB [420041]**
1,000 mg, intravenous, Administer over: 10 Minutes, Every 30 min PRN, If bleeding continues 30 minutes after the first dose or stops/restarts within 24 hours, a second tranexamic dose may be given, Starting today, For 2 Doses
Maximum infusion rate is 100 mg/min to avoid hypotension.
Tranexamic Acid Indication: Hemorrhage: OB/GYN

Postprocedure Care [136868]

Diet

- Adult NPO Diet [DIET30]**
Diet effective now, Starting today For Until specified
NPO except:

Adult Diet - Regular [DIET24]

Diet effective now, Starting today For Until specified

Diet type: Regular

Diabetes:

Cardiac Restrictions:

Calorie Restriction:

Chewing Difficulties:

Solid Consistency:

Bariatric Restriction:

Fat restriction:

Sodium restriction:

Potassium restriction:

GI Restrictions:

Renal Restrictions:

Dietary fluid restriction / 24h:

Fluid consistency:

Other restriction(s):

 Adult Diet - Clear Liquid [DIET24]

Diet effective now, Starting today For Until specified

Diet type: Clear liquid

Diabetes:

Cardiac Restrictions:

Calorie Restriction:

Chewing Difficulties:

Solid Consistency:

Bariatric Restriction:

Fat restriction:

Sodium restriction:

Potassium restriction:

GI Restrictions:

Renal Restrictions:

Dietary fluid restriction / 24h:

Fluid consistency:

Other restriction(s):

 Adult Diet (specify details) [DIET24]

Diet effective now, Starting today

Diet type:

 Fluid restriction - 1500 mL / 24h [NUR515]

Until discontinued, Starting today

Fluid restriction total / 24h: 1500 mL Fluid

 Fluid restriction (Specify) [NUR515]

Until discontinued, Starting today

Fluid restriction total / 24h:

Transfusion Orders [250139]**Blood Products - Adult [19308]**

Default Phase of Care: Postpartum

Indications for Special Blood Product Processing**CMV-negative:**

- Premature neonates, pregnant women, HIV-infected or immunocompromised patients, hematopoietic progenitor cell and solid organ transplant recipients, and fetuses receiving intrauterine transfusions.

Leukoreduced blood components:

- Reduces the incidence of febrile nonhemolytic transfusion reactions.
- Decreases the risk of transfusion transmitted cytomegalovirus (CMV) and other infections transmitted by WBCs.

- Decreases the incidence of HLA alloimmunization.
- May decrease the incidence of transfusion related immunomodulation (TRIM), a transient depression of the immune system following transfusion.

Irradiated cellular blood components:

- Prevention of graft-versus-host disease in at-risk patients, including fetuses receiving intrauterine transfusions; neonates; patients with hematopoietic progenitor cell transplants, congenital immunodeficiencies of cellular immunity, or Hodgkin lymphoma; and patients undergoing treatment for malignancy. More specifically, patients being treated with purine analogues (fludarabine, cladribine and deoxycoformycin) or medications that affect T-cells (alemtuzumab) should also receive irradiated blood products.
- Certain products should always be irradiated: granulocytes, HLA-matched products, and blood products donated by relatives.

Washed cellular blood components:

- Patients who have a history of severe allergic, anaphylactoid, or anaphylactic reactions.
- Can also be used for patients at risk for transfusion related hyperkalemia.

Volume-reduced blood products:

- Patients at risk for volume overload.
- May also be indicated to remove plasma prior to an ABO incompatible platelet transfusion.

Source: College of American Pathologists Transfusion Medicine Resource Committee, 12/2009

Whole Blood is only available at ORMC and Bayfront

- Red Blood Cells [8673] (Selection Required)
- Prepare RBC [LAB282] Routine
 - Transfuse RBC [NUR619] Routine
- Platelets (Pheresed) [8675] (Selection Required)
- Prepare platelet pheresis [LAB1720] Routine
 - Transfuse pheresed platelets [NUR627] Routine
- Fresh Frozen Plasma [8676] (Selection Required)
- Prepare fresh frozen plasma [LAB487] Routine
 - Transfuse fresh frozen plasma [NUR621] Routine
- Cryoprecipitate [8677] (Selection Required)
- Prepare cryoprecipitate [LAB486] Routine
 - Transfuse cryoprecipitate [NUR622] Routine
- Granulocytes [8678] (Selection Required)
- Prepare granulocytes [LAB1722] Routine
 - Transfuse granulocytes [NUR624] Routine
- Whole Blood [8679] (Selection Required)
- Prepare whole blood [LAB1721] Routine
 - Transfuse whole blood [NUR623] Routine
- Convalescent Plasma [238512] (Selection Required)
- Prepare convalescent plasma [LAB7423] Routine
 - Transfuse convalescent plasma [NUR7677] Routine

Specialty Packs [184845]

Default Phase of Care: Postpartum

- ECMO [184873]

Specify RBC special requirements as HGB S-negative

- Adult Blood Administration - Red Blood Cells [8673] (Selection Required)**
 - Prepare RBC [LAB282]**
STAT
HGB S-negative & < 7 days old
 - Transfuse RBC [NUR619]**
STAT
HGB S-negative & < 7 days old
- Fresh Frozen Plasma [8676] (Selection Required)**
 - Prepare fresh frozen plasma [LAB487] STAT**
 - Transfuse fresh frozen plasma [NUR621] STAT**
- OB Pack [184846]**
 - Red Blood Cells [8673] (Selection Required)**
 - Prepare RBC [LAB282] STAT**
 - Transfuse RBC [NUR619] STAT**
 - Platelets (Pheresed) [8675] (Selection Required)**
 - Prepare platelet pheresis [LAB1720] STAT**
 - Transfuse pheresed platelets [NUR627] STAT**
 - Fresh Frozen Plasma [8676] (Selection Required)**
 - Prepare fresh frozen plasma [LAB487] STAT**
 - Transfuse fresh frozen plasma [NUR621] STAT**

Mass Transfusion Protocol [250192]

Default Phase of Care: Postpartum

- Massive Transfusion Protocol #1, Additional coolers prepared every 15 minutes [208841]**
MTP order defaults do not need to be changed. Coolers will be prepared every 15 minutes.
 - Massive Transfusion Protocol #1 [NUR7620] STAT**
 - Prepare RBC [LAB282]**
STAT
This order is for SoftBank product release for an MTP #1
 - Prepare fresh frozen plasma [LAB487]**
STAT
This order is for SoftBank product release for an MTP #1
 - Prepare platelet pheresis [LAB1720]**
STAT
This order is for SoftBank product release for an MTP #1
 - Prepare cryoprecipitate [LAB486]**
STAT
This order is for SoftBank product release for an MTP #1
 - Prepare whole blood [LAB1721]**
STAT
This order is for SoftBank product release for an MTP #1
 - tranexamic acid (CYCLOKAPRON) IVPB [420041] 1,000 mg, intravenous, Administer over: 10 Minutes, Once, For 1 Doses**
 - calcium chloride injection [1306]**
3 g, intravenous, Once, For 1 Doses
May be administered IV push via peripheral access as part of the Massive Transfusion Protocol.
- Massive Transfusion Protocol #2, Additional coolers prepared up request [208860]**
MTP order defaults do not need to be changed. Additional coolers will be prepared upon

request.

- Massive Transfusion Protocol #2 [NUR7621]** STAT
- Prepare RBC [LAB282]**
STAT
This order is for SoftBank product release for an MTP #2
- Prepare fresh frozen plasma [LAB487]**
STAT
This order is for SoftBank product release for an MTP #2
- Prepare platelet pheresis [LAB1720]**
STAT
This order is for SoftBank product release for an MTP #2
- Prepare cryoprecipitate [LAB486]**
STAT
This order is for SoftBank product release for an MTP #2
- Prepare whole blood [LAB1721]**
STAT
This order is for SoftBank product release for an MTP #2
- tranexamic acid (CYCLOKAPRON) IVPB [420041]** 1,000 mg, intravenous, Administer over: 10 Minutes,
Once, For 1 Doses
- calcium chloride 100 mg/mL (10 %) injection [1306]**
3 g, intravenous, Once, For 1 Doses
May be administered IV push via peripheral access as part of the Massive Transfusion Protocol.