

(place patient label here)

Patient Name: \_\_\_\_\_



PROVIDER ORDERS

**Order Set Directions:**

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Diagnosis: \_\_\_\_\_

Allergies with reaction type: \_\_\_\_\_

**OB Hemorrhage**

**Version 3 04/16/18**

**Stage 1 Activation Criteria**

**Cumulative Blood Loss > 500 mL Vaginal Birth or > 1000 mL Cesarean Birth**

**\*\*OR\*\***

**Vital Signs > 15% change or HR > 110 or BP < 85/45 mmHg or SpO2 < 95%**

**\*\*OR\*\***

**Increased bleeding during recovery or postpartum**

**Stage 2 Activation Criteria**

**Continued bleeding and vital sign instability**

**\*\*AND\*\***

**Cumulative Blood Loss < 1500 mL**

**Stage 3 Activation Criteria**

**Cumulative Blood Loss > 1500 mL**

**\*\*OR\*\***

**Greater than 2 units PRBC's transfused**

**\*\*OR\*\***

**Unstable**

**\*\*OR\*\***

**Suspicion of DIC**

**Stage 1 Hemorrhage Orders**

***Nursing Orders***

- OB Hemorrhage Stage 1 Management
- \* NOTIFY OB Provider
- \* NOTIFY Anesthesia/CRNA
- \* NOTIFY Charge Nurse
- \* Hemorrhage Cart to Bedside
- \* Ensure that OB Tech is in House
- \* Establish IV Access with 18g if not Present
- \* Maintain or Increase LR with oxytocin 20 unit/1 liter to 999 mL/hour
- \* Apply Vigorous Fundal Massage
- \* Vital Signs with SpO2 and LOC (Document in Meditech) Every 5 Minutes
- \* Oxygen as Needed to Maintain SpO2 > 95%
- \* Strict I/O, Weigh All Materials and Record Cumulative Blood Loss Every 5-15 Minutes
- \* Document All Fluids and Blood Products Given on the Parenteral Flow Intervention in Meditech
- \* Place Foley with Urometer
- \* Keep Patient Warm
- \* Obtain Consent for Blood Products
- \*\*IF Continued Bleeding or Unstable Vital Signs AND Cumulative Blood Loss <1500 mL PROCEED TO STAGE 2
- \*\*IF Cumulative Blood Loss > 1500 mL OR > 2 units PRBC's Given OR Patient Unstable OR Suspicion for DIC PROCEED TO STAGE 3
- \*\*IF Stabilized, Continue Modified Postpartum management with increased Surveillance

Initials \_\_\_\_\_

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Patient Name: \_\_\_\_\_

BENEFIS HEALTH SYSTEM  
**Benefis**  
HOSPITALS



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**Medications**

oxytocin in lactated ringers 20 unit/1,000 mL IV (PITOCIN)

- BOLUS at 999 mL/hour intravenously

oxytocin in lactated ringers 30 unit/1,000 mL IV (PITOCIN)

- BOLUS at 999 mL/hour intravenously

oxytocin in lactated ringers 40 unit/1,000 mL IV (PITOCIN)

- BOLUS at 999 mL/hour intravenously

methylergonovine (METHERGINE)

- 0.2 milligram intramuscularly once . If good response may repeat every 2-4 hours as directed by provider to a MAX 5 doses(1 mg). IF NO RESPONSE after 1st dose, ask provider for alternate agent. \*USE WITH EXTREME CAUTION IF PATIENT IS HYPERSENSITIVE\* Hold if systolic blood pressure is greater than or equal to 140 mmHg OR diastolic blood pressure is greater than or equal to 90 mmHg.

miSOPROStol (CYTOTEC)

- 600 microgram rectally once as needed as directed by physician
- 800 microgram rectally once as needed as directed by physician
- 1000 microgram rectally once as needed as directed by physician

**Laboratory**

**Blood Bank**

- ALL blood products are leukocyte reduced, this attribute does not need to be ordered.

**Packed Cells (RBC) Orders:**

Packed Cells (BBK)

- stat Quantity: 2 Additional Instructions for Blood Bank: Postpartum Hemorrhage
- Keep Ahead Packed Cell [BBK]: Quantity 2

**Stage 2 Hemorrhage Orders**

**Nursing Orders**

- OB Hemorrhage Stage 2 Management

- \* OB Provider to bedside
- \* Anesthesia/CRNA to Bedside
- \* Establish 2nd 18g IV
- \* Announce and Document Vital Signs with SpO2, LOC, and Cumulative Blood Loss Every 5-10 Minutes
- \* Document All Fluids and Blood Products Given on the Parenteral Flow Intervention in Meditech
- \* Continue Fundal Massage
- \* Bring 2 units PRBC's to Bedside (Transfuse as Directed by Provider)
- \* Set Up Blood Administration Set and Blood Warmer
- \* Set Up Bakri Balloon
- \* Place Foley with Urometer, If Not Already Done
- \* Bair Hugger To side For Patient Warming
- \* Open and Set Up Hysterectomy Tray
- \* Consider Moving to OR
- \*\*IF Cumulative Blood Loss > 1500 mL OR > 2 units PRBC's Given OR Patient Unstable OR Suspicion for DIC  
PROCEED TO STAGE 3
- \*\*IF Stabilized, Continue Modified Postpartum Management with Increased Surveillance

Initials\_\_\_\_\_

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**PROVIDER ORDERS**

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**Medications**

oxytocin in lactated ringers 20 unit/1,000 mL IV (PITOCIN)

- intravenously BOLUS to run at \_\_\_\_\_ milliliter/hour

oxytocin in lactated ringers 30 unit/1,000 mL IV (PITOCIN)

- intravenously BOLUS to run at \_\_\_\_\_ milliliter/hour

oxytocin in lactated ringers 40 unit/1,000 mL IV (PITOCIN)

- intravenously BOLUS to run at \_\_\_\_\_ milliliter/hour

methylergonovine (METHERGINE)

- 0.2 milligram intramuscularly once . If good response may repeat every 2-4 hours as directed by provider to a MAX 5 doses(1 mg). IF NO RESPONSE after 1st dose, ask provider for alternate agent. \*USE WITH EXTREME CAUTION IF PATIENT IS HYPERSENSITIVE\* Hold if systolic blood pressure is greater than or equal to 140 mmHg OR diastolic blood pressure is greater than or equal to 90 mmHg.

miSOPROStol (CYTOTEC)

- 800 microgram rectally once as needed as directed by physician

carboprost (HEMABATE)

- 250 microgram intramuscularly once may repeat every 20-90 minutes to MAX 8 doses/2000 mcg in 24 hours as directed by provider

**Laboratory**

**Obtain the following STAT:**

- CBC/AUTO DIFF
- PT (PROTIME AND INR)
- PTT
- FIBRINOGEN
- COMPREHENSIVE METABOLIC PANEL
- MAGNESIUM LEVEL, PLASMA
- PHOSPHORUS LEVEL, PLASMA
- PLATELET FUNCTION TEST

**Blood Bank**

**Packed Cells (RBC) Orders:**

Transfuse Packed Cell (Adult) NUR

- units to transfuse: 2
- Duration:As fast as possible
- Hold maintenance IV fluid during transfusion [ ] Yes [ x ] No
- Additional instructions for nursing: \_\_\_\_\_ Use Normal Saline ONLY with transfusion of packed cells.

**Fresh Frozen Plasma (FFP) Orders:**

- Consider ordering and thawing 2-4 units FFP (takes 30 minutes to thaw) if transfusing >2 units PRBC's FFP (BBK)
  - Quantity: 2

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**Stage 3 Hemorrhage Orders**

**Nursing Orders**

- OB Hemorrhage Stage 3 Management
- \* Activate Rapid Response (1111)
- \* Call Patient Flow and Notify of Possible Need for ICU Bed
- \* Continue to Announce and Document Vital Signs with SpO<sub>2</sub>, LOC and Cumulative Blood Loss Every 5-10 Minutes
- \* Document All Fluids and Blood Products Given on the Parenteral Flow Intervention in Meditech
- \* Continue Uterine Massage
- \* Move to OR
- \* Bair Hugger for Patient Warming
- \* SCD's to Lower Extremities
- \* Consider Central Line (Set Up to Bedside)

**Medications**

- oxytocin in lactated ringers 20 unit/1,000 mL IV (PITOCIN)
  - intravenously BOLUS to run at \_\_\_\_\_ milliliter/hour
- oxytocin in lactated ringers 30 unit/1,000 mL IV (PITOCIN)
  - intravenously BOLUS to run at \_\_\_\_\_ milliliter/hour
- oxytocin in lactated ringers 40 unit/1,000 mL IV (PITOCIN)
  - intravenously BOLUS to run at \_\_\_\_\_ milliliter/hour
- methylergonovine (METHERGINE)
  - 0.2 milligram intramuscularly once . If good response may repeat every 2-4 hours as directed by provider to a MAX 5 doses(1 mg). IF NO RESPONSE after 1st dose, ask provider for alternate agent. \*USE WITH EXTREME CAUTION IF PATIENT IS HYPERSENSITIVE\* Hold if systolic blood pressure is greater than or equal to 140 mmHg OR diastolic blood pressure is greater than or equal to 90 mmHg.
- miSOPROStol (CYTOTEC)
  - 800 microgram rectally once as needed as directed by physician
- carboprost (HEMABATE)
  - 250 microgram intramuscularly once may repeat every 20-90 minutes to MAX 8 doses/2000 mcg in 24 hours as directed by provider
- Tranexamic Acid (CYKLOKAPRON)
  - 1 gram intravenously ONCE over 10 minutes \*May repeat **one time** if bleeding persists after 30 minutes or if bleeding restarts within 24 hours after the first dose\* \*Notify provider if second dose is needed\*

**Laboratory**

**Obtain the following STAT every 30 minutes:**

- CBC/AUTO DIFF
- PT (PROTIME AND INR)
- PTT
- FIBRINOGEN
- Blood gas study [ x ] Arterial

**Obtain the following STAT (if not already done):**

- COMPREHENSIVE METABOLIC PANEL
- MAGNESIUM LEVEL, PLASMA
- PHOSPHORUS LEVEL, PLASMA
- PLATELET FUNCTION TEST

**Blood Bank**

- MASSIVE TRANSFUSION (Notify Blood Bank)

Provider Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_