CEmONC

DIAGNOSTIC OF POST PARTUM HEMORRAGE (PPH)

Blood loss of >500 ml in the first 24 h following the delivery

IMMEDIATE *(under the responsibility of staff in charge of delivery)*

Note the hour=T0
Commence PPH chart

RAPID EVALUATION
HR, BP, SpO_2, conscious level
Estimated volume loss
Large IV cannula (G16/18)

ALERT TEAM
Obstetrician
Anaesthetic team
Blood bank technician

SEEK CONSENT (as comprehensive as possible)
Contact patient's family

To be done within the First 30 minutes

RESUSCITATION

① IMMEDIATE RESUSCITATION

- Rapid volume loading:
  Ringer lactate (RL) 1000ml over 15 min
  or
  Gelofusine 500ml over 15 min
- 2nd large IV cannula (G16/18)
- High flow Oxygen
- Check Hemocue + blood group
- Evaluate blood transfusion availability
- Cimetidine effervescent tab 200mg PO (unless patient is comatose)
- CLOSE MONITORING

② START ADVANCED RESUSCITATION

- Maintain good haemodynamic status
  Targets : SBP ≥ 100 mmHg, SpO_2 ≥ 95 %,
  urine output ≥ 30 ml/h, normal mental state
- Intravascular volume filling : Ringers lactate up to 2000 ml, then colloids ± blood
- Rewarming

CONTROL BLEEDING

- UTERINE MASSAGE
- If placenta not delivered:
  - Manual removal
- Ensure uterus is EMPTY
- Antibiotic : Cefazoline 2 g IV
- Ensure no cervical/vaginal tears
  - Suture
- URINARY CATHETER
- UTEROTONICS :

1st Oxytocine
10 IU IV stat
20 IU in 500ml RL at 40-60 drops/min

2nd If no response at 15 min
Methylergometrine 0.2 mg IM
and/or
Misoprostol 600 µg SL or RECTAL

3rd INSERT **BAKRI BALOON**

TRANSFER ASAP OT

Once in operating theatre

CONTINUE ADVANCED RESUSCITATION

- Continue intravascular filling (RL, colloid, blood)
- Administration of vasoactive drugs
  -**Ephedrine** by IV bolus 6 mg (max 60 mg)
  -Dopamine by syringe driver 10-20 µg/kg/min
  or **Adrenaline** by syringe driver 0.02-0.5 µg/kg/min
- Recheck Hemocue (Target Hb : minimum7 g / dL)

SURGICAL TREATMENT IF NO IMPROVEMENT

- CONSERVATIVE
- HYSTERECTOMY

Don't wait for the appearance of a DIC to perform an emergency hysterectomy

Admission to ICU for all patients

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