

*Jackson County Medical Control Authority*

**MICU Protocols**

**BLOOD ADMINISTRATION**

Date: December 2017

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***Blood Administration***

Blood administration may be continued by MICU paramedic. If additional units are indicated they may be initiated as ordered by the sending facility.

Indications:

Type and cross for donor units for the following conditions:

1. Obvious large amount of blood loss
2. Active or recent GI bleeding
3. TAA or AAA
4. Hgb < 8 mg/dl or Hct < 25%

Administration of blood (universal donor indicated) may be performed if delay for type and cross is determined to be potentially detrimental to the patient.

Adverse Effects:

Consider termination if:

1. Signs of anaphylaxis
2. CP, DIB, decreased BP and bleeding (may suggest hemolytic reaction).
3. Monitor fluid output and color (dark may suggest hemoglobinuria).

Contact sending facility physician, on-call MICU physician or medical control if:

1. Patient becomes febrile, i.e., one or two degrees Fahrenheit above baseline (document temperature at least twice during treatment, once at the sending facility and once before arrival at receiving facility).

Administration

Typically wide-open for management of shock or hemorrhage, otherwise as per medical direction.

MICU Directives:

1. Follow generalized protocol for MICU transports.
2. Use large bore tubing (blood Y tube) and catheters in large veins.
3. Warm crystalloid prior to administrations.
4. Use isotonic solution only.
5. Pressure bag may be indicated.