PPH Emergency Response

AMTSL
CALL FOR HELP!

First Response Bundle
- Uterine Massage
- IV Fluids
- Uterotonics
- Tranexamic Acid

SUPPORTIVE MEASURES
- Treat tears
- Empty bladder
- Empty uterus

Refractory PPH Interventions
- Compression
- Uterine Balloon
- Anti-shock Garment

SUPPORTIVE MEASURES
- Transfusion
- Referral
- Surgery

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Additional Best Clinical Practices

**PPH Prevention**
- Anemia prevention and early detection
- Malaria prevention, detection, and control
- HIV status and treatment if necessary
- Identification of previous and current co-morbidities
- Birth planning and complication preparedness

**First Response**
- Early recognition of excessive bleeding
- Monitor vital signs (pulse, BP, temperature, and respirations), volume and rate of blood flow, level of consciousness or anxiety, skin color, and response to treatments
- Laboratory Testing for Hgb/HCT, clotting factors (or bedside clotting test), and Type and Cross match
- If Placenta delivered, was it intact, or is it retained?
- Reassurance to woman and her family that everything is being done

**Response to Refractory PPH**
- Inform woman and her family of treatment options, provide reassurance
- Continue monitoring for status and development of shock, if shock suspected begin shock management
- Surgical Management
  - Uterine compression sutures
  - Uterine or utero-ovarian artery ligation
    - Begin with conservative management, try to spare the uterus
  - If woman continues to bleed, perform hysterectomy

**Quality PPH Emergency Care**

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