

CODE RED – ROYAL INFIRMARY OF EDINBURGH 2020

Activate **pre-hospital or in ED** for **TRAUMA** patient with:
Suspected or confirmed bleeding
Systolic blood pressure < 90 mmHg (in an adult patient) who is
Unresponsive to fluid boluses.

STEP 1. PHONE 2222. Say “**CODE RED TRAUMA CALL, ROYAL INFIRMARY OF EDINBURGH**” & state your current location and patient ETA

*** *STAY ON THE LINE WHILE YOU ARE CONNECTED TO BLOOD BANK* ***



****Ensure the patient gets a name band at the earliest opportunity after arrival****

STEP 2. Tell Blood Bank:

- i. A contact number (likely Trauma Team Leader phone)
- ii. Gender and if pregnant
- iii. Patient's exact location and planned moves
- iv. Ask for **TRAUMA PACK A** components to come down to ED (You do not need to state what you specifically require.
 - You will be automatically issued with 4 units of universal red cells (or type specific if BTS sample received) and 4 units of universal FFP (or type specific if BTS sample received).
 - Red cells are likely to come down first followed by other components as they become available.
 - You do not need to make a further phone call, FFP will now come down to the ED as soon as it is ready.

BLOOD PORTER WILL AUTOMATICALLY BE NOTIFIED OF CODE RED AND WILL ATTEND BLOOD BANK

STEP 3. Confirm Activation of Code Red with the Trauma Team Lead (TTL).

- i. Confirm blood available in ED emergency satellite blood fridge (4xO negative red cells)
- ii. If on arrival of the patient/after resuscitation the TTL wants further blood components then phone **27504** and request **TRAUMA PACK B**.
 - You do not need to state what you specifically require. You will be automatically issued with 6 unit of universal red cells (or type specific if BTS have a tube), 6 units of universal (or type specific) FFP, 1 unit of universal (or type specific) platelets, 2 units of cryoprecipitate

FOR FURTHER COMMUNICATION WITH BLOOD BANK PHONE ext 27504

STEP 4. TTL identifies the team member to act as named point of contact with emergency blood porter.

- i. Confirm &/or log receipt of expected blood components
- ii. Handover any samples to the blood porter for urgent transfer to the lab
- iii. Perform ROTEM
- iv. Remember 1g TXA within 3 hrs of injury and remember TXA infusion after bolus dose
- v. Remember Calcium replacement. **Stand down Code Red when appropriate**
 - 1 unit of platelets refers to a pool of 6 whole blood derived concentrates (i.e. you would give 1 unit every 6 units of blood if practising 1:1:1 transfusion).
 - Notify blood bank if you have used or wasted the ED blood fridge red cells so that it can be replenished. Do not put platelets in the ED blood fridge

BLOOD PORTER WILL RETURN TO BLOOD BANK UNLESS ADVISED OTHERWISE

STEP 5. At the end of the Code Red the TTL should:

- i. Inform Blood Bank the Code Red is over
- ii. Ensure all transfusion Labels, Tags & Documentation completed & returned