Treatment Protocol: PREGNANCY COMPLICATION

Ref. No.1217

CHANGE LOG

Published	Status	Section and	Description of Change(s)
Date		Subsection Affected	
09/01/2023	Addition, Revision, + Removal	#9, #11, #12, #13, SPECIAL CONSIDERATIONS	 Revised #9; "elevate presenting fetal part off the umbilical cord; maintain elevation of the presenting part until transfer of care" removed repositioning mother Removed language "check cord for pulses (previously #10)" and "If no cord pulsation, manually displace presenting fetal part off the umbilical cord until pulsations are felt; maintain elevation of the presenting part until transfer of care (previously #11)" Revised #13 to include using suprapubic pressure to the McRobert's Maneuver Added #21 "For patients within 3 hours post delivery with ongoing bleeding and one or more of the following: Systolic blood pressure (SBP) <90 mmHg, OR Heart rate > SBP, OR Estimated blood loss >500mL Tranexamic Acid (TXA) 1 gram in 50 or 100mL Normal Saline IV/IO, infuse over 10 minutes" Added SPECIAL CONSIDERATION "In addition to manually elevating the presenting part from the umbilical cord, placing the patient in Trendelenburg position during transport can help to elevate the presenting part off the cord to maintain blood flow to the fetus. Do not attempt to push a prolapsed cord back in." Revised SPECIAL CONSIDERATION To clearly

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			define the difference between pre-eclampsia and eclampsia Revised SPECIAL CONSIDERATION to include information on initiating TXA and fluids concurrently for ongoing hemorrhage >500mLs
07/01/24	Re-Date/Re-Sign	Not applicable	Not applicable

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