



CODE OMEGA / Massive Transfusion Protocol (MTP)

2024

Current Practice: Code Omega / MTPs in current state are driven by NH Policy. The initiation of an MTP involves a cascade of rapid interventions to aid in the critical patient.

Practice/Process Change: In future state, the overall flow of an MTP remains the same. General documentation of any critical event also remains the same. However, there are two notable changes.

The first change requires the charge nurse / designate to now enter the Porter through Capacity Management (CareAware).

The second change specifically involves the documentation of blood administration. The expectation is that this will now be captured entirely through BRIDGE Blood Transfusion. However, to ensure safe flow, blood product issue sheets will continue to be sent with each blood product.

Important Messages

- PowerPlan (order set) names:
 - *Massive Transfusion Protocol 1, or MTP1 and,*
 - *Massive Transfusion Protocol 2 or MTP2*
- Charge nurses / designate must now enter for Porter in CapMan (CareAware e.g., 'request MTP')
- Two staff may have the same patient open in Bridge at once (e.g., one to maintain all blood products, one to enter vitals)
- MTP will involve 2 main workflow options in BRIDGE:
 - **MULTI-UNIT TRANSFUSION** Transfusion of *multiple* units of components (crossed or *uncrossed units)
 - MTP1 = 6 RBC, 4 plasma, 1 platelet
 - MTP2 = 4 RBC, 4 plasma, 1 platelet
 - **ADMINISTER DERIVATIVE** Transfusion of blood derivatives
 - e.g., Fibrinogen conc



Future Flow: Below is the flow process for “Massive Transfusion (MTP) – Adult or Pediatric 50 Kg and Greater” with changes noted.

NH Massive Transfusion Protocol (MTP) Process

