**Patient Information:**

<table>
<thead>
<tr>
<th>Name:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of birth:</td>
</tr>
<tr>
<td>Diagnosis:</td>
</tr>
<tr>
<td>Severity:</td>
</tr>
<tr>
<td>Level:</td>
</tr>
<tr>
<td>Other medical information:</td>
</tr>
<tr>
<td>Date of recommendation:</td>
</tr>
<tr>
<td>Signature of physician:</td>
</tr>
</tbody>
</table>

**Recommended Treatment:**

<table>
<thead>
<tr>
<th>Product and dose/kg for life or limb-threatening bleeds:</th>
</tr>
</thead>
<tbody>
<tr>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Product and dose/kg for moderate/minor bleeds:</th>
</tr>
</thead>
<tbody>
<tr>
<td>------------------------------------------------</td>
</tr>
<tr>
<td>------------------------------------------------</td>
</tr>
</tbody>
</table>

---

**GUIDELINES FOR EMERGENCY MANAGEMENT OF RARE INHERITED BLEEDING DISORDERS**

---

TreatFirst

---

Canadian Hemophilia Society
Help Stop the Bleeding

---

Association of Hemophilia Clinic Directors of Canada

---

www.hemophilia.ca/emergency
• PROMPT TRIAGE AND ASSESSMENT.
• Determine the severity of the bleed.
• Recognize that bleeding in the head, spine, abdomen or pelvis may initially be occult and potentially life-threatening.

• TREAT FIRST AND INVESTIGATE LATER.
• Avoid invasive procedures such as arterial punctures unless the patient has received treatment.
• NO IM injections and NO ASA.
• The patient or guardian may be your most important resource, so do ask about specific treatment protocols.

• CONTACT THE PATIENT’S BLEEDING DISORDER TREATMENT CENTRE WHERE A HEMATOLOGIST IS ALWAYS ON CALL.
• Provide clear discharge instructions and arrange a follow-up plan or admit to hospital if necessary.

Use Universal Precautions

Remember…

Treat First

PROMPT TREATMENT will halt bleeding, minimize long-term complications and can save life. If bleeding persists, follow the guidelines for life or limb-threatening bleeds and call the:

Bleeding Disorder Treatment Centre

Hospital: ________________________________

Physician: ________________________________

Nurse: ________________________________

Day phone: ________________________________

Night phone: ________________________________

DELAY IN THE RESTORATION OF HEMOSTASIS TO THE PATIENT WITH A RARE INHERITED BLEEDING DISORDER MAY BE LIFE OR LIMB-THREATENING.

LIFE OR LIMB-THREATENING BLEEDS

PATIENT MUST RECEIVE TREATMENT URGENTLY

• Head (intracranial) and neck
• Chest, abdomen, pelvis, spine
• Iliopsoas muscle and hip
• Active GI bleed
• Massive vaginal hemorrhage
• Extremity muscle compartments
• Fractures or dislocations
• Any deep laceration
• Any uncontrolled bleeding

MODERATE/MINOR BLEEDS

PATIENT MUST RECEIVE TREATMENT WITHIN 30 MINUTES WHENEVER POSSIBLE

• Nose (epistaxis)
• Mouth (including gums)
• Joints (hemarthroses)
• Menorrhagia
• Abrasions and superficial lacerations