

Care plan number 12

Child with Haemophilia with a bleed

All care plans must be used in conjunction with care plan 1

Care plan 12 Problem		Hemophiliac Goals	Issue date: January 2015 Review date: January 2019
<p>..... has & is admitted with a bleeding episode</p> <p>Joint <input type="checkbox"/></p> <p>Muscle <input type="checkbox"/></p> <p>Head Injury <input type="checkbox"/></p> <p>Other _____</p>		<ol style="list-style-type: none"> 1. Coagulation needs will be met to prevent further bleeding 2. Prompt detection of further bleeding 3. Child will be pain free 4. Mobility will be supported 5. Specific care 6. Education and discharge planning 7. Pre and Post Op requirements of a haemophiliac undergoing surgery 	
Commenced, date, time and signature	No	Nursing Intervention	
	1.	Support coagulation needs	
		<ul style="list-style-type: none"> ▪ Assess factor deficiency, baseline factor level and appropriate treatment required ▪ Determine any inhibitor history or allergies ▪ Administer appropriate treatment as per prescription sheet and Haemostasis & Thrombosis Guidelines <p style="margin-left: 40px;">Coagulation factor concentrate <input type="checkbox"/></p> <p style="margin-left: 40px;">DDAVP <input type="checkbox"/></p> <p style="margin-left: 40px;">Tranexamic acid <input type="checkbox"/></p> <p style="margin-left: 40px;">Other <input type="checkbox"/></p>	
	2.	Prompt detection and prevention of further bleeding	
		<ul style="list-style-type: none"> ▪ Assess and document location and severity of bleed ▪ Use first aid measures as appropriate ▪ Assess vital/neurological/neurovascular signs as appropriate to site of bleeding ▪ Only monitor Blood Pressure if required or indicated ▪ Observe for signs of further bleeding as appropriate to the site <ul style="list-style-type: none"> Visible signs of bleeding ↑swelling/heat/pain at the affected area ↓ range of movement Haematuria/melaena Haematemesis/Haemoptisis ▪ Monitor and document circumference measurement of affected limb ▪ Record and report any deviation in patient's condition to the haematology team ▪ Apply cold pack as per consultant/physiotherapy orders ▪ Maintain strict bed-rest as per consultant orders ▪ Apply pressure bandage as per consultants orders ▪ Refer to 'PRICE' Guidelines (Prophylaxis treatment/Pain/Rest/Ice/Compression/Elevation. 	

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3.	Pain	
	<ul style="list-style-type: none"> ▪ Assess pain using age appropriate pain assessment tool ▪ Ensure careful positioning of the affected limb ▪ Administer analgesia as prescribed. ▪ Do not use medications from the Non Steroidal Anti-Inflammatory group. (NSAIDS) ▪ Do not administer PR/IM medication ▪ Monitor and record the effectiveness and side effects of analgesia ▪ Provide non pharmacological methods of pain relief such as 	
4.	Mobility	
	<ul style="list-style-type: none"> ▪ Assess level of mobility of affected limb ▪ Immobilise the affected limb as per consultant orders ▪ Support Activities of Living as per care plan No. 1 ▪ Ensure parents/guardians and child understand the importance of bed-rest ▪ Observe skin integrity and use pressure relieving devices as appropriate ▪ Liaise with physiotherapy and occupational therapy 	
5.	Specific care	
	<ul style="list-style-type: none"> ▪ Administer prophylaxis treatment as prescribed ▪ Assist medical team with obtaining blood samples ▪ Care of IV cannula/Port-A-Cath as per OLCHC Intravenous guidelines see care plan no.9 	
6.	Education and discharge planning	
	<ul style="list-style-type: none"> ▪ Liaise with Haematology CNS re ongoing education and support & discharge advice as required. ▪ Liaise with occupational therapy/physiotherapy ▪ Follow-up care as appropriate 	
7.	Pre and Post Op Care	
	<ul style="list-style-type: none"> ▪ On admission, ensure patient has pre-op protocol in place as set out by hematology team specifying interventions and management of patient on the day of surgery up until discharge. ▪ Ensure all factor and bloods are requested on day of admission. ▪ Complete pre-op checklist and ensure informed consent is obtained as per hospital guidelines. Refer to care plan 6. ▪ Complete pre op MRSA screen as per infection control guidelines. ▪ Liaise with theatre coordinator to ensure patient is transferred to theatre by 12pm on day of surgery. 	