## Major haemorrhage - Example Audit tool

Section	Question	Options
Patient identifier	Anonymised	E.g. CPC1, JTH1
Location of patient	Where were they?	☐ Home ☐ Hospice   ☐ Hospital ☐ Care home      ☐ Other
Risk assessment		
Why is patienet at risk of bleeding?	What is the cause of bleeding risk	Site of cancer with fungating/malignant ulceration e.g. head and neck, haematological, breast, penile cancer, other
		Presentation with bleeding e.g. haemoptysis in lung cancer, melaena
		Co-existing disease e.g. gastrointestinal bleeding, oesophageal varices
		Smaller warning (herald) bleeds
		Local infection at the tumour site
		Clotting abnormalities (including liver failure)
	Drugs that inhibit coagulation	Yes No  Which ones: a. Warfarin b. DOAC c. Low molecular weight heparin d. Aspirin e. Clopidogrel f. Other



Advance Care Planning	Documented advance care plan available in place patient was.	Yes No   If yes was there: a. DNACPR   b. TEP/ReSPECT form completed c. Place of death documented   If yes was it: Home   Home Hospice   Hospital Care home
	Documented review of medicines and consideration of stopping	Yes No   If yes which drugs   Warfarin   DOAC   Low molecular weight heparin   Aspirin   Clopidogrel   Other
	Communication with other health care professionals	☐ Yes ☐ No  Documentation in house
	Prepare equipment: Haemostatic Gauze / Granules for bleeding wounds	What was put in house:  Haemostatic gauze Adrenaline soaks/ Tranexamic acid soaks Haemostatic Granules Other
	Dark towels, surgical face shields (where available), gloves, aprons, plastic sheet or pads, clinical waste bags	☐Yes ☐No
	Was there a prescription and preparation of crisis medication and emergency drug box?	Yes No  If yes free text document which drugs

Outcome	Where did they die?	☐ Home ☐ Hospice ☐ Hospital ☐ Care home
		Other
		Was this their preferred place of care?
		☐Yes ☐No
	Did they bleed?	☐ Yes ☐ No
		If yes tick all that apply:
		Large bleed requiring intervention
		Small bleed no interventions required
		Time between bleed and death:
		1 hour
		Less than 4 hours
		Less than 12 hours
		Less than 24hours
		24hours-7 days
		☐ More than 7 days
		☐ Other
	If yes	What equipment was used:
		Haemostatic gauze
		Adrenaline soaks
		Tranexamic acid soaks
		CeloxTM dressings (or similar)
		☐ Dark towels
		Midazolam – buccal
		Free text dose
		Midazolam - IM
		Free text dose used



Outcome continued	How did the family experience the bleeding?	Feedback from family
	How did the staff involved experience the bleeding?	Feedback from staff

## Table 1 Published evidence outside of licence

Efeoglu, C et al. Turk J Gastroenterol 2019;30(2):171-6	CeloxTM CeloxTM vs Surgicel in 80 patients with cirrhosis having tooth extractions.  No significant difference between products
Carles, G etal. J Gynaecol Obst Huma Reprod 2017	4 case reports of post-partum haemorrhage resolved by using Celox.
Muzzi, L et al. Interactive Cardiovascular & Thoracic Surgery 2012;14:695-698	2 case reports of patients post-cardiotomy needing ECMO where CeloxTM CeloxTM was used on sternal edges and pericardial cavity alongside other measure such as VAC.

