

# Case 2

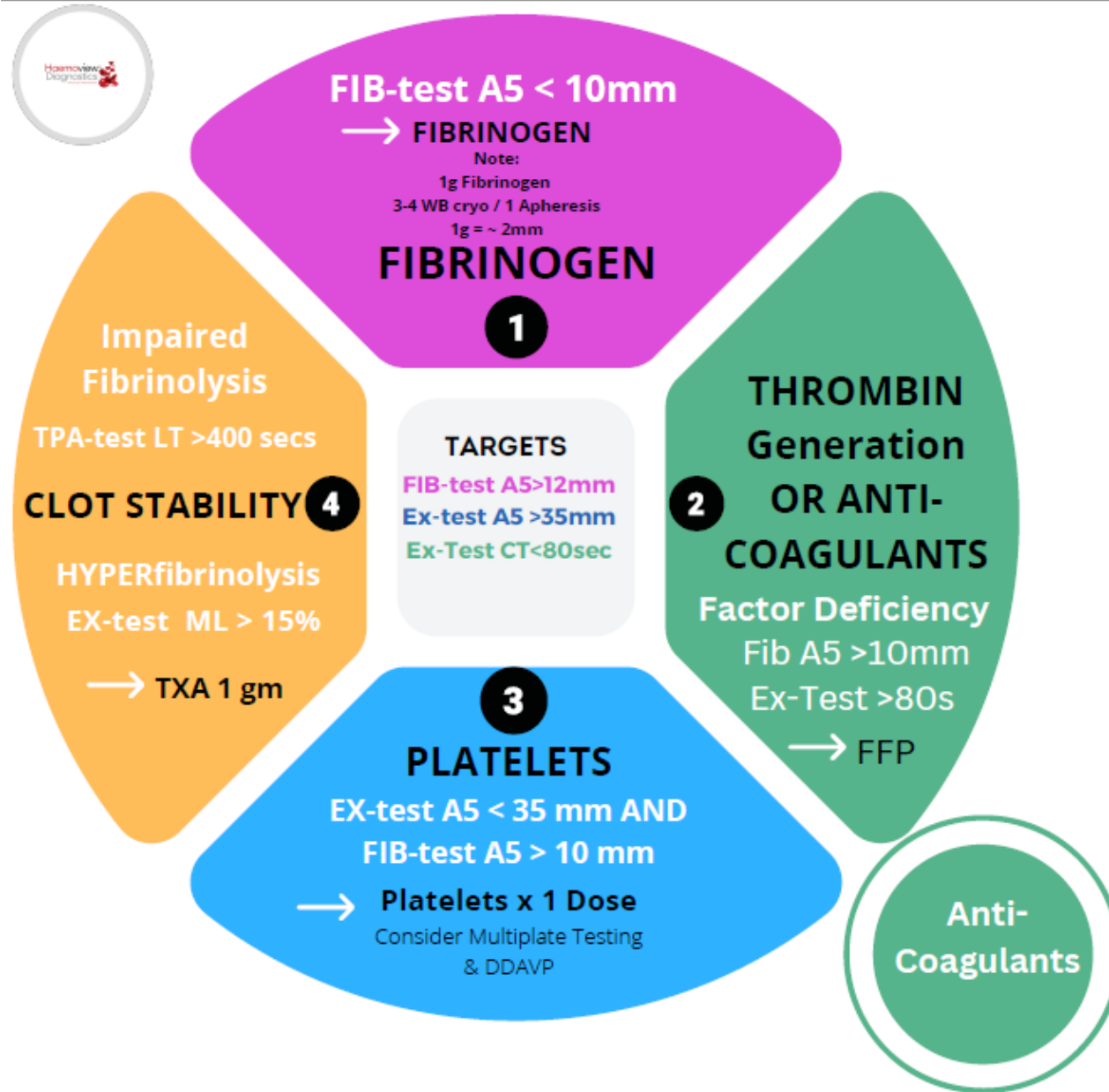
Thanks to Haemoview Diagnostics for supplying this educational material and these cases.

Try to interpret these cases first yourself using your knowledge and the Clotpro algorithm.

Disclaimer: These cases are provided for educational purposes only, they do not constitute medical advice. You should follow your local institutional policies and use your own clinical judgement.



Only treat abnormal value if **SIGNIFICANT BLEEDING** is present.



**RVV Test**  
 Fxa Inhibitors/ LMWH  
 CT >100s ~50ng/ml  
 CT 100-150s- DOAC EFFECT  
 CT >150s RELEVANT effect- reversal indicated

**ECA Test**  
 Direct Thrombin Inhibitors  
 CT >180s  
 Dabigatan > 50ng/ml

**IN-Test**  
 Heparin Effect  
 IN-test CT > 190s and  
 $\frac{IN-test\ CT}{HI-test\ CT}$  ratio  $\geq 1.25$

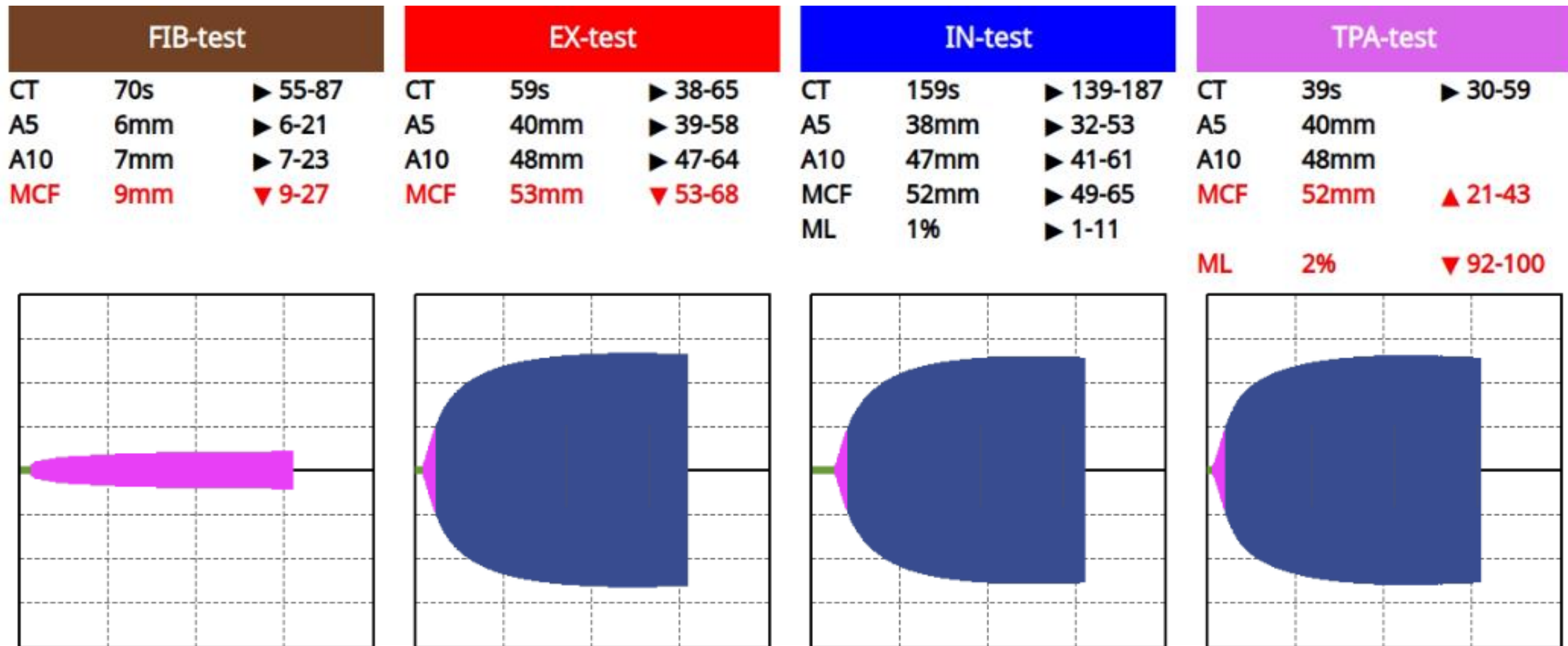
**Hi-Test**  
 Protamine  
 IN-test AND HI-test  
 CT > 240 s

Physiological Targets

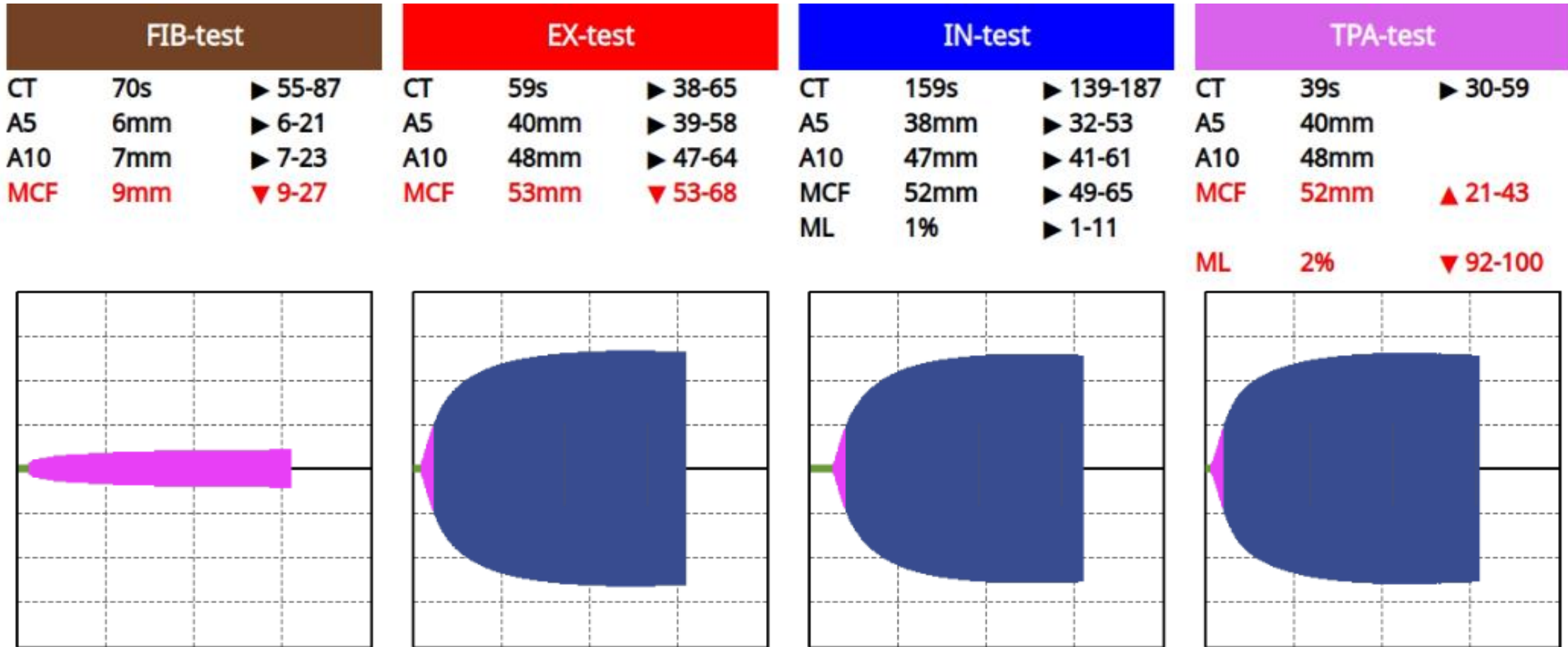
- T° > 36
- pH > 7.2
- iCa > 1mmol/L

- 27 year old male helicopter medivac after high-speed MBA versus car.
- Fluid resuscitation at scene ( +1gm TXA) and ventilated with head injury, chest and pelvic injuries.
- Unstable during transport and further resuscitation with blood and fibrinogen.

## Interpret the following clotpro analysis performed on this patient:



# Interpretation



As seen with young trauma victims in the early stages, low fibrinogen levels and no apparent deficiency of coagulation factors or platelets.

Hyperfibrinolysis can be a problem in severe trauma. In this case the effects of being given 1 gm of Tranexamic Acid (TXA) on scene, are evident by the LT missing in the TPA-test, a result of lysis being completely blocked.