POSTPARTUM HAEMORRHAGE

Updated guidance July 2026

Complete all steps

1. PREVENT POSTPARTUM HAEMORRHAGE

PREVENT

- Give uterotonic within 1 min of birth
  - Oxytocin 10 IU IV (diluted and administered slowly over 1- 2 minutes) or IM **or** Carbetocin 100 µg IM or IV **or** Misoprostol 400-600 µg PO
- Wait for spontaneous delivery of the placenta

2. BE ALERT FOR POSTPARTUM HAEMORRHAGE AND IDENTIFY IT EARLY

ASSESS
- Uterine tone, blood loss and flow, and BP & pulse

→ If uterus is not well contracted, apply uterine massage

RECORD
- Perform an objective measurement of blood loss

→ e.g., with calibrated drapes for blood loss collection

IDENTIFY
heavy bleeding after delivery
- Blood loss ≥300ml plus one warning sign (see box right) OR
- Blood loss ≥500ml OR
- Clinical judgement

→ **Warning signs**
HR >100
SBP <100 or DBP <60 or pulse > SBP
Rapid blood flow, large clots, history of anaemia

3. ARRANGE IMMEDIATE TRANSFER TO QUALIFIED OBSTETRIC PROVIDER!

4. ATTEMPT TO CONTROL BLEEDING (while arranging for and during transfer)

Use **MOTIVE** mnemonic

- Complete the bundle within 15 minutes
- The order does not matter
- Give all elements in the bundle even with improvement

- **M**assage uterus until it has contracted.
- **O**xytocic
  - Give Oxytocin 10 units IV (diluted and administered slowly over 1- 2 minutes) or IM **or**
  - Misoprostol (800 mcg SL) if cold storage not possible.
- Give **T**ranexamic acid 1g IV over 10 min (in 200ml crystalloid)
- Start **IV** to quickly give medication, fluids and tests.
- Establish a 2nd IV access
- **E**xamine and **E**scalate (see below)

5. EXAMINE

Has the placenta delivered?

NO →
- Continue uterine massage (when uterus is hard, placenta will likely deliver)
- Complete the MOTIVE Bundle

YES →
- Complete the MOTIVE Bundle

Is there a perineal or lower vaginal tear?

YES →
- Apply pressure with sterile gauze, put legs together.

Still bleeding?

YES →
- **E**scalate - give additional uterotonics
  - Oxytocin 20 IU in 1000 mL IV **or** Misoprostol 800 µg SL **or** Ergometrine 200 µg IV or IM
- Repeat Tranexamic acid (1g IV over 10 min in 200ml crystalloid) 30 min after 1st dose.
- Complete the MOTIVE Bundle and manage shock.

NO →
- Complete the MOTIVE Bundle
- Continue oxytocin at least 1 hour after bleeding stops (20 units in 1 L IV over 4 hrs)
- Record uterine tone, blood loss & BP/HR every 15 min

6. TRANSFER IMMEDIATELY (Ensure patient is transferred to an obstetric provider)