surgery at Square Hospital Limited developed 800ml drain collection within 3 hours with significant fall of blood pressure.

Preoperative findings: Hemoglobin: 14.1 g/dl, Platelet count: 132K/µL, INR:1.12 and the patient had discontinued Antiplatelet drugs 9 days prior to surgery.

Intraoperative details:

The patient underwent on-pump Aortic valve replacement (AVR) surgery. Heparin was adequately reversed with protamine. 4 unit FFP was given. Hemostasis was satisfactory before chest closure.

Postoperative Course:

Within the first 3 hours in ICU, mediastinal drain collection reached 800ml and continued at a high rate. The patient developed significant hypotension (BP 49/39mmHg) with tachycardia with inotropic support. The decision was made for emergency re-exploration. Standard laboratory results were pending. Due to ongoing bleeding ROTEM analysis was performed immediately.

Re-exploration Findings:

No bleeding point was found and hemostasis was secured and chest was closed.

ROTEM findings:

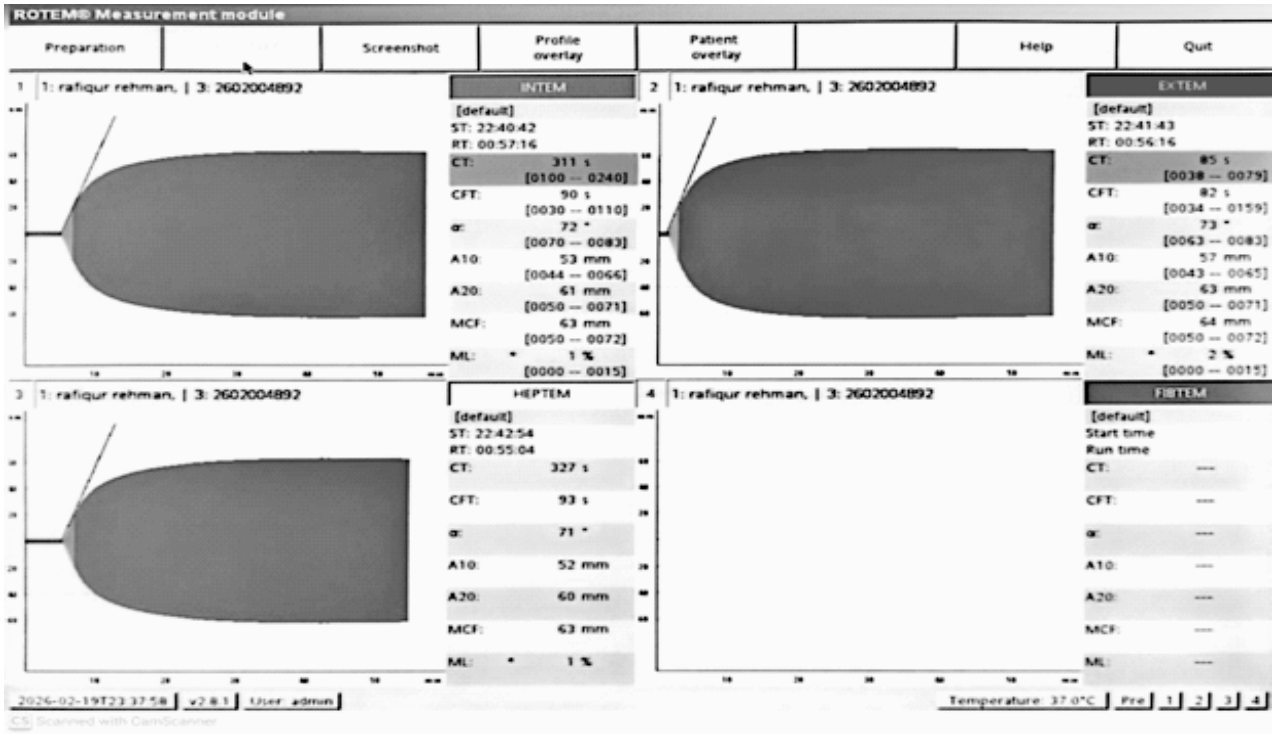

Figure : 1

EXTEM CT: 95 seconds (prolonged)
EXTEM A10: 57 mm (Normal)
INTEM / HEPTEM ratio: < 1

Interpretation:

* Prolonged Prothrombin time.
* No residual heparin effect.
* No platelet deficiency.
* No fibrinogen deficiency
* No clot lysis.