ROTEM guided management: Based on the ROTEM algorithm:

* FFP 15ml/kg given
* No additional Protamine required
* No empirical platelet transfusion was given
* No cryoprecipitate required

Outcome:

Within 1 hour after targeted transfusion, chest drain collection decreased to 0-20ml/hour. Haemodynamics improved and vasopressor requirement reduced. He was extubated at postoperative day 01 and discharged from CT-ICU on day 04.

Patient 2 (Coronary Artery Bypass Surgery)

A 42-year-old male undergoing CABG at Square Hospital Limited developed 320ml drain collection within 3 hours with hypotension and tachycardia.

Preoperative findings: Hemoglobin: 14.1 g/dl, Platelet count: 188K/µL, INR:1.05 and the patient had discontinued Antiplatelet drugs 1 day prior to surgery.

Intraoperative details:

The patient underwent off-pump CABG surgery. Heparin was adequately reversed with protamine. 2 small unit platelet was given and hemostasis was satisfactory before chest closure.

Postoperative Course:

Within the first 3 hours in our CT- ICU, mediastinal drain collection reached 320ml and continued at a high rate. The patient developed significant hypotension with tachycardia.

Standard laboratory results were pending. Due to ongoing bleeding ROTEM analysis was performed immediately.

ROTEM findings:

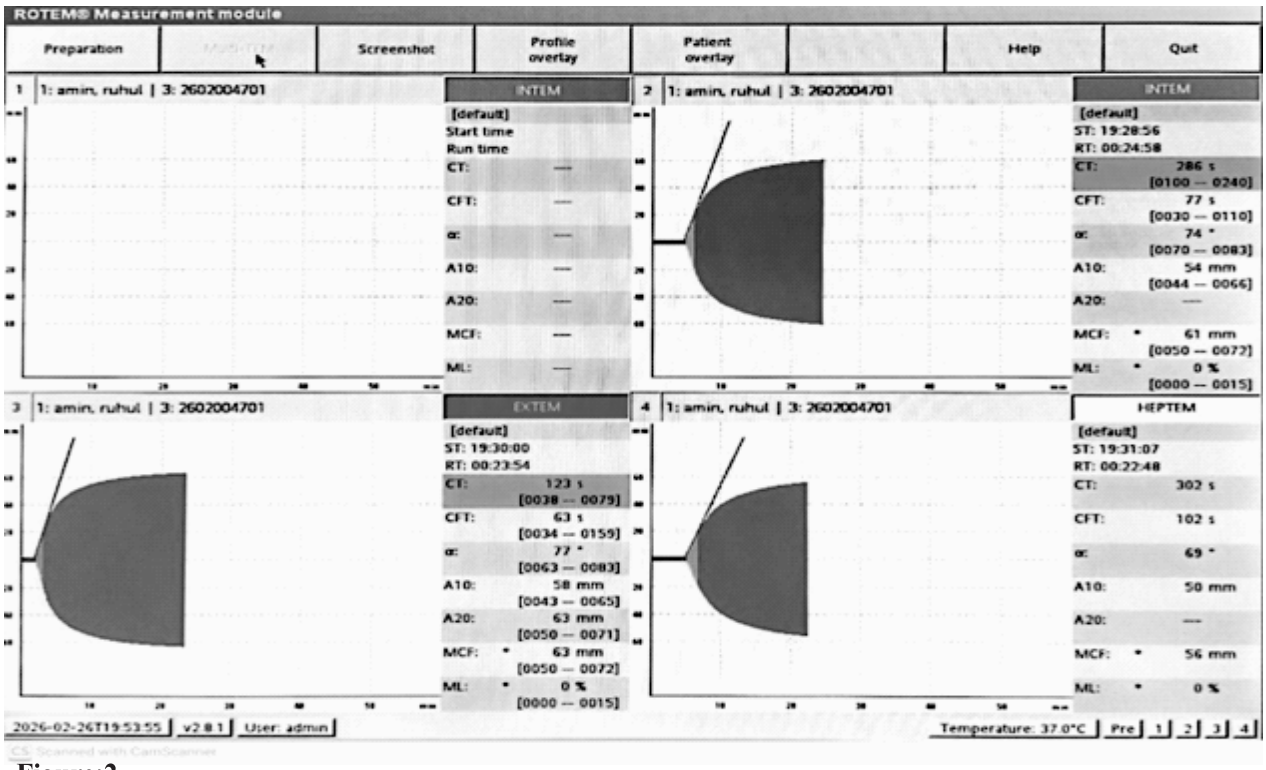

Figure:2

EXTEM CT: 123 seconds (prolonged)

EXTEM A10: 58 mm (Normal)

INTEM / HEPTEM ratio: < 1