ANNEX 4
Hospital flow chart

ADMISSION
Administer intravenous therapy (follow Fig. 3.1),
give oral fluids ad lib.,
collect acute serum, monitor:
– haematocrit
– fluid intake/output

BLEEDING OR
RESTLESSNESS
(signs of shock)
Yes
No

ADMINISTRATION

IMPROVEMENT
(pulse pressure
>20 mmHg (2.7 kPa),
haematocrit normal)
Yes
No

Administer intravenous
fluid bolus (follow Fig. 3.2),
sedate if necessary
– serum electrolytes
– blood gases

Continue to administer
intravenous therapy
(follow Fig. 3.1)

Continue to administer
intravenous colloid
therapy (follow Fig. 3.2)

Discontinue intravenous therapy,
indicated, collect convalescent serum

DETERIORATION
Yes
No

HAEMATOCRIT
RISING

Search for
haemorrhage,
administer blood
transfusion

Discontinue
intravenous therapy
when indicated, collect
convalescent serum

IMPROVEMENT
Yes
No

FLUID
OVERLOAD
(Pulmonary oedema,
Kinking neck veins, rapid, rapidly
enlarging lower half
rate > 100 mm

Consider treating
with furosemide

Discontinue intravenous therapy
when indicated, collect
convalescent serum

Administer
intravenous colloid
therapy (see Fig. 3.2)