

Adult cryoprecipitate dosing

Review of adult cryoprecipitate dosing

OFFICIAL

Health services and transfusion laboratories are reminded to review the updated cryoprecipitate dosing recommendations, which align with the National Blood Authority (NBA) Patient Blood Management (PBM) Guideline for adults with critical bleeding. These updates reflect the higher concentration of fibrinogen in each unit of cryoprecipitate.

Updated guidelines can be accessed via [MAGICapp](https://app.magicapp.org/#/guideline/Evqmmn) <https://app.magicapp.org/#/guideline/Evqmmn> or the [NBA website](https://www.blood.gov.au/patient-blood-management-guideline-adults-critical-bleeding) <https://www.blood.gov.au/patient-blood-management-guideline-adults-critical-bleeding>

Current variation in practice

Cryoprecipitate dosing algorithms continue to vary across Australia, particularly in ROTEM (rotational thromboelastometry) or TEG (thromboelastography) guided Major Haemorrhage Protocols. Some protocols continue to specify 10 units of cryoprecipitate, rather than the updated 9-unit dose.

Giving more cryoprecipitate than clinically required exposes patients to avoidable transfusion risk and is inconsistent with best practice and blood stewardship principles.

Adult dosing

- In Australia, the *NBA Patient blood management guideline for adults with critical bleeding* recommends a fibrinogen dose of 3 – 4 g. This can be achieved with:
 - **9 units** of whole blood derived cryoprecipitate and/or split apheresis cryoprecipitate.
- For ROTEM/TEG guided algorithms:
 - **3 units of cryoprecipitate is equivalent to 1g of fibrinogen.**
- The volume of cryoprecipitate depends on the clinical situation and patient size and should be guided by laboratory assays of coagulation function.

Recommendations

Health services are requested to:

- Review and where required update local Major Haemorrhage Protocols (MHP) and ROTEM/TEG guided MHPs to align with the updated guidelines.

FEISTY II study protocol

Hospitals participating in the FEISTY II study should continue to follow the trial-specific cryoprecipitate dosing protocol, as outlined in the Lifeblood communication attached.

Further information is available from Australian Red Cross Lifeblood:

- [Cryoprecipitate | Australian Red Cross Lifeblood](https://www.lifeblood.com.au/health-professionals/products/blood-components/cryoprecipitate) <<https://www.lifeblood.com.au/health-professionals/products/blood-components/cryoprecipitate>>
- [Use of cryoprecipitate | Australian Red Cross Lifeblood](https://www.lifeblood.com.au/health-professionals/clinical-practice/use-of-blood-components/use-of-cryoprecipitate) <<https://www.lifeblood.com.au/health-professionals/clinical-practice/use-of-blood-components/use-of-cryoprecipitate>>

Supporting document

Lifeblood communication letter September 2025 (attached).

References

National Blood Authority (2023, updated 2025) Patient blood management guideline for adults with critical bleeding <https://www.blood.gov.au/patient-blood-management-guideline-adults-critical-bleeding>, accessed 24 June 2026.

National Blood Authority Major Haemorrhage Protocol (2025) <https://www.blood.gov.au/patient-blood-management-guideline-adults-critical-bleeding>, accessed 24 June 2026.

NSW Health Safety Notice 004/26: Changes to adult cryoprecipitate doses: Implications for Major Haemorrhage Protocols <https://www.health.nsw.gov.au/sabs/Documents/2026-sn-004.pdf>, accessed 24 June 2026.

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