

# Epistaxis



## History

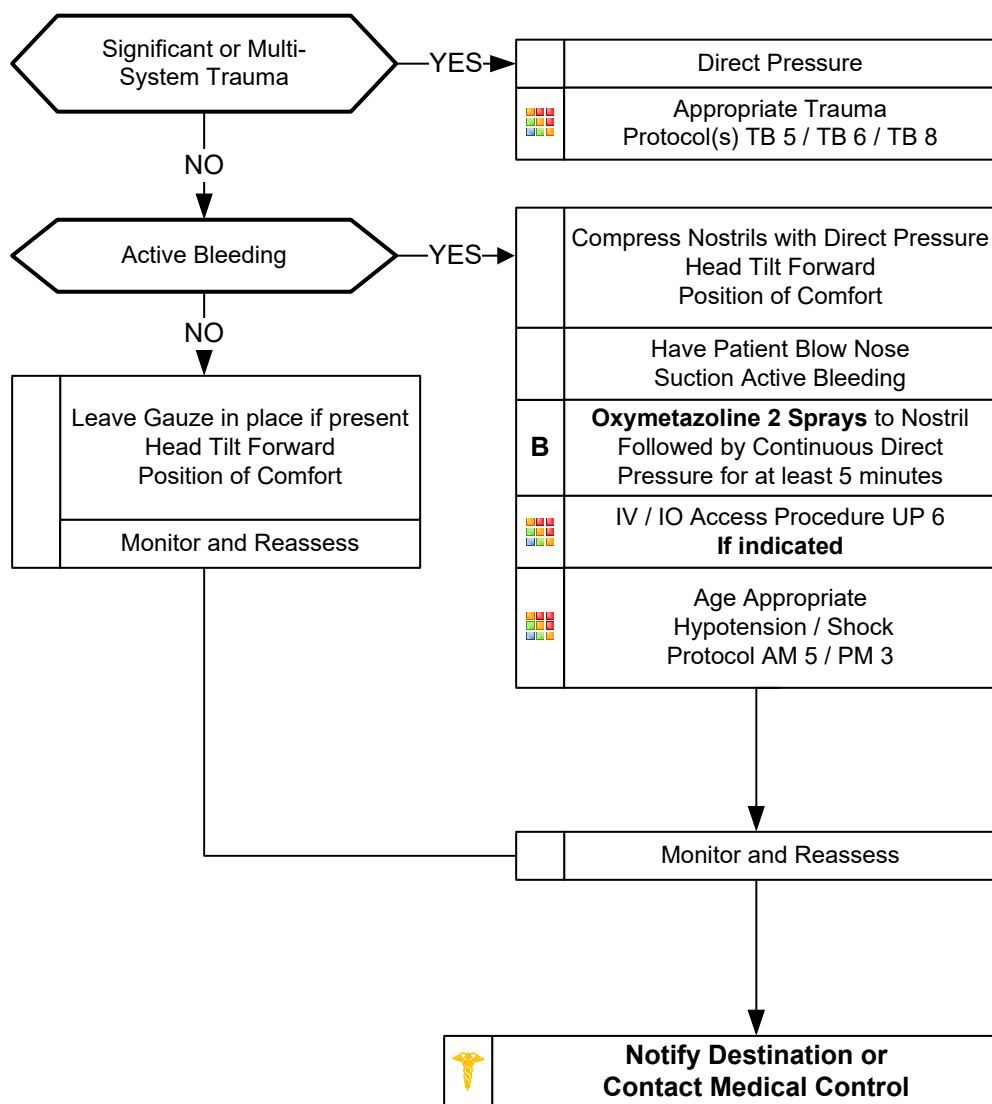
- \* Age
- \* Past medical history
- \* Medications (HTN, anticoagulants, aspirin, NSAIDs)
- \* Previous episodes of epistaxis
- \* Trauma
- \* Duration of bleeding
- \* Quantity of bleeding

## Signs and Symptoms

- \* Bleeding from nasal passage
- \* Pain
- \* Nausea
- \* Vomiting

## Differential

- \* Trauma
- \* Infection (viral URI or Sinusitis)
- \* Allergic rhinitis
- \* Lesions (polyps, ulcers)
- \* Hypertension



## Age Specific Blood Pressure indicating possible shock

Age 0 – 28 days: SBP < 60  
 Ages ≥ 1 month: SBP < 70  
 Age 1 – 9: SBP < 70 + (2x Age)

Ages 10 – 64: SBP < 90  
 Ages ≥ 65: SBP < 110

All ages Shock Index:  
 HR > SBP

Universal Protocol Section

## Pearls

- \* **Recommended Exam: Mental Status, HEENT, Heart, Lungs, Neuro**
- \* It is very difficult to quantify the amount of blood loss with epistaxis.
- \* Bleeding may also be occurring posteriorly. Evaluate for posterior blood loss by examining the posterior pharynx.
- \* Anticoagulants include warfarin (Coumadin), Apixaban (Eliquis), heparin, enoxaparin (Lovenox), dabigatran (Pradaxa), rivaroxaban (Xarelto), and many over the counter headache relief powders.
- \* Anti-platelet agents like aspirin, clopidogrel (Plavix), aspirin/dipyridamole (Aggrenox), and ticlopidine (Ticlid) can contribute to bleeding.