**Vaginal Bleeding**

For vaginal bleeding in the NON-pregnant patient. For vaginal bleeding in pregnancy, use primary impression Pregnancy Complications.

### History
- Last menstrual period
- Age
- Amount of bleeding (volume and duration)
- Trauma/sexual assault
- Comorbid illnesses/medications (e.g., hormone replacement, anticoagulants)
- Other bleeding/bruising
- Pregnancy possibility
- OB history
- Birth control use

### Signs and Symptoms
- Dysuria
- Abdominal pain
- Vaginal discharge
- Fever/chills

### Differential
- Pelvic inflammatory disease
- UTI/cystitis
- Endometrial cancer
- Pregnancy-related bleeding, including ectopic
- Dysfunctional uterine bleeding
- Genitourinary injury/laceration
- Retained product(s) of conception
- Fibroids

### Differential Actions

<table>
<thead>
<tr>
<th>Action</th>
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<tbody>
<tr>
<td>Cardiac monitor</td>
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<tr>
<td>Consider 12-Lead ECG</td>
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<tr>
<td>Establish two large bore IVs if hemodynamically unstable</td>
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<tr>
<td>If systolic BP &lt; 90</td>
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<tr>
<td>Normal Saline bolus 500ml IV/IO</td>
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<td><strong>Maximum 2L</strong></td>
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<td>For nausea</td>
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<tr>
<td><strong>consider, Ondansetron</strong></td>
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<tr>
<td>For pain</td>
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<tr>
<td><strong>consider, Fentanyl</strong></td>
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</table>

** Notify receiving facility.**
**Consider Base Hospital for medical direction.**

### Pearls
- Amount of bleeding best determined by number of fully saturated pads per hour.
- If patient has passed tissue, collect and properly secure for transport.