### Pediatric Upper GI Bleeding

**For vomiting blood or coffee ground emesis, and for melena (i.e., black, tarry stools)**

<table>
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<tr>
<th>History</th>
<th>Signs and Symptoms</th>
<th>Differential</th>
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<tbody>
<tr>
<td>Congenital abnormalities</td>
<td>• Coffee ground emesis</td>
<td>• Varices</td>
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<tr>
<td>Varices</td>
<td>• Hematemesis</td>
<td>• Gastritis</td>
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<tr>
<td>Medications (e.g., ibuprofen, ASA, steroids)</td>
<td>• Tachycardia</td>
<td>• Bleeding ulcer</td>
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<tr>
<td>Stress</td>
<td>• Hypotension</td>
<td>• Epistaxis</td>
</tr>
<tr>
<td>GERD</td>
<td>• Black, tarry stool</td>
<td>• Hemoptyis</td>
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<tr>
<td>Ulcers</td>
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<td>• Mallory Weiss tear</td>
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<tr>
<td>Vomiting</td>
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<td>• Pepto Bismol use</td>
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<tr>
<td>Liver disease</td>
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<td>• Food allergy</td>
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<tr>
<td>History of oral intake</td>
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</tbody>
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### Signs and Symptoms
- Coffee ground emesis
- Hematemesis
- Tachycardia
- Hypotension
- Black, tarry stool

### Differential
- Varices
- Gastritis
- Bleeding ulcer
- Epistaxis
- Hemoptyis
- Mallory Weiss tear
- Pepto Bismol use
- Food allergy

### Pearls
- Hemoptysis and epistaxis can appear to be an upper GI bleed. Perform a thorough history and assessment.
- Limit time on scene and transport quickly.

### Treatment Protocol

1. **Cardiac monitor**
2. Consider, 12-Lead ECG
3. Establish two large bore IVs if hemodynamically unstable
4. If age-dependent hypotensive
   - Normal Saline bolus IV/IO
   - May repeat x2
   - Consider, Ondansetron
5. For pain, consider, Fentanyl
   - Consider Base Hospital for medical direction