

Epistaxis

Pinch the nostrils (fleshy part of the nose) or use nasal clamps for 15 mins.

If ongoing bleeding

- Patient should blow nose to remove all clots
- Treat affected nostril(s) with 3 sprays of xylometazoline nasal spray (Otrivin, Dristan, Balminil)
- Pinch the nostrils or use nasal clamps for 15 mins



If ongoing bleeding

- Patient should blow nose to remove all clots
- Cauterize Little's Area/Kiesselbach's plexus (the anterior nasal septum) with topical silver nitrate; never cauterize both sides of septum due to risk of perforation
- Pinch the nostrils or use nasal clamps for 15 mins



If ongoing bleeding

- Patient should blow nose to remove all clots
- Consider nasal packing with "Rhino Rocket"/"MeroCel" if you stock them
- If nasal packing is not available, **refer to the ED** for assessment

If bleeding STOPS

- Ask the patient to walk around the office to ensure bleeding does not restart
 - If bleeding recurs, **refer to the ED** for assessment
 - If no ongoing bleeding, your patient may go home; recommend nightly nasal saline irrigation and Vaseline/Polysporin/Secaris ointment to affected side for at least a week and all through the winter for people prone to nosebleeds

