# VAGINAL BLEEDING REFERRAL GUIDELINE

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## **HIGH RISK**

SUGGESTED EMERGENT CONSULTATION

#### **SYMPTOMS AND LABS**

Heavy vaginal bleeding

Heavy vaginal bleeding with severe anemia or symptoms

Bleeding in pregnancy

Bleeding or spotting with positive pregnancy test unconfirmed Intrauterine Pregnancy (IUP) \*

## **MODERATE RISK**

SUGGESTED CONSULTATION OR CO-MANAGEMENT

#### **SYMPTOMS AND LABS**

Postmenopausal bleeding

Endometrial hyperplasia

Bleeding on Hormone Replacement Therapy (HRT)

Irregular bleeding with fibroids

Post coital bleeding

Irregular bleeding

## **LOW RISK**

SUGGESTED ROUTINE CARE

#### **SYMPTOMS AND LABS**

Irregular menses

Irregular bleeding on Oral Contraceptive (OCP)

Irregular bleeding with IUD

Irregular bleeding with progestin containing implants such as Nexplanon

# SUGGESTED PREVISIT WORKUP

Labs: CBC

Pelvic ultrasound at MFM

Send last annual exam with pap and mammograms

# SUGGESTED WORKUP

Labs: CBC

Pelvic ultrasound at MFM

Send last annual exam with pap and mammograms

# SUGGESTED MANAGEMENT

Pelvic exam

Labs: CBC, TSH

Medication adjustment

Change type of OCP or dosage

### CLINICAL PEARLS

- Saturating more than two pads an hour is heavy and emergent situation. Needs visit or ED
- Irregular spotting or bleeding can occur for up to 12 weeks or 3 month post IUD and on-going Nexplanon
- \* Bleeding with positive pregnancy test and unconfirmed IUP or location go to ED to R/O ectopic



These clinical practice guidelines describe generally recommended evidence-based interventions for the evaluation, diagnosis and treatment of specific diseases or conditions. The guidelines are: (i) not considered to be entirely inclusive or exclusive of all methods of reasonable care that can obtain or produce the same results, and are not a statement of the standard of medical care; (ii) based on information available at the time and may not reflect the most current evidenced-based literature available at subsequent times; and (iii) not intended to substitute for the independent professional judgment of the responsible clinician(s). No set of guidelines can address the individual variation among patients or their unique needs, nor the combination of resources available to a particular community, provider or healthcare professional. Deviations from clinical practice guidelines thus may be appropriate based upon the specific patient circumstances.