

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) *

SUGGESTED PREVISIT WORKUP

Labs: CBC

Pelvic ultrasound at MFM

Send last annual exam with pap and mammograms

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

SUGGESTED WORKUP

Labs: CBC

Pelvic ultrasound at MFM

Send last annual exam with pap and mammograms

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 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