

Eden Aldrich, RCP

**STANDING ORDER
NOSE BLEEDS**

I. ASSESSMENT

- A. Obtain history of frequency of nose bleeds, what triggers the nose bleed, length of time of nose bleed, the amount of bleeding and the presence of nasal allergy or hay fever. How did the nosebleed stop?
- B. Check vital signs if indicated.
- C. Is there history of taking blood thinners?

II. MANAGEMENT

- A. If the nosebleeds are of short duration, easily stopped or blood is only exhibited in tissue following nose blowing, no further treatment needed.
- B. If nosebleed is moderate to severe, have the inmate apply direct pressure to nose by squeezing firmly just below nasal bone and lean forward. When the nosebleed stops, have the inmate lay down for a time. Instruct patient to leave nose alone for 24 hours (no picking, blowing nose).
- C. May give Ocean Spray nasal spray (or equivalent).
- D. May treat with topical antibiotic if membrane is dry and/or cracked. Use cotton tip applicator to apply ointment in nasal cavity.
- E. If the nosebleed does not resolve in a reasonable length of time, transport to Emergency Department for assessment and treatment.
- F. May use ice packs on bridge of nose to assist with treatment.