# Epistaxis (Nose Bleed) Level I

**EPISTAXIS (Nose Bleed)**  
Level I  
*(If subjective data sufficient, no exam is necessary)*

**Skill Level:** RN  

**Definition:** The discharge of blood from the nares due to rupture of a blood vessel in the nose (usually the anterior septum).

## MILD

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<th>Subjective:</th>
<th>Assessment:</th>
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| • "I have a bloody nose."  
• Obtain a history of Trauma, anti-coagulant use or recent increase/excessive use of Aspirin/NSAIDs.  
• Obtain time of onset, duration, severity, frequency and side of initial bleed.  
• Consider bleeding disorder history. | • Potential for anxiety.  
• Risk for bleeding.  
• Ineffective Airway Clearance. |

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<th>Objective:</th>
<th>Plan:</th>
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| • Subjective data sufficient for institution of treatment plan.  
• Check medication records for use of anti-cholinergic drugs. May cause drying.  
• Swelling, without deformity, may be present. | At nursing discretion may also use any of the below:  
• Application of ice may help stop bleeding.  
• Apply very firm continuous external compression by pinching anterior nose for 15 minutes.  
• Keep patient in sitting position with head tilted forward (to prevent blood pooling in posterior nasopharynx). |
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Patient Education:

1. Instruct patient against vigorous blowing of or picking at nose or use of Aspirin/NSAIDs.
2. Contact Health Services if nosebleed recurs.
3. May use Vaseline or other petroleum based product for 1-2 weeks to minimize dry mucous membranes. Dry mucous membranes can contribute to recurrent nosebleeds.
4. Do not instruct patient to lie back, lean back, tilt head back or put head between legs.

APPROVED:

Medical Services Manager ___________________________ Date

Chief Medical Officer ___________________________ Date

Medical Director ___________________________ Date

Effective Date: 3/2015
Revised: February 2015