VAGINAL HEMORRHAGE
ALWAYS USE BODY SUBSTANCE ISOLATION PRECAUTIONS

INDICATION
- Profuse or abnormal vaginal bleeding, any bleeding in pregnancy, including signs of shock

TREATMENT
- ALS RMC
- Pregnant patients > 20 weeks gestation:
  - Position on left side & support abdomen, including patients immobilized on backboards
- Non-pregnant:
  - Trendelenberg position
- IV NS 250 ml; MR as needed to maintain SBP ≥ 100
- Bleeding in 3rd trimester or post-partum with blood loss > 500 ml:
  - 2nd large-bore IV
- If post-partum and placenta delivered:
  - Fundal massage and put infant to breast if appropriate

CRITICAL INFORMATION
- Last menstrual period

DOCUMENTATION- ESSENTIAL ELEMENTS
- Estimate blood loss
- Estimated weeks of gestation

RELATED POLICIES/ PROCEDURES
- Non-Traumatic shock M 1
- Destination Guidelines GPC 4