Acute epistaxis

First aid: Compress the whole soft part of the nose for 10 minutes

Personal protective equipment PPE:
- Gloves
- Gown
- Glasses
- Mask

Epistaxis equipment:
- Headlight
- Thudicum speculum
- Fraser ENT suction
- Cophenylcaine
- Packing forceps
- Ribbon gauze or cotton wool
- Silver nitrate
- Rapid rhino epistaxis balloon pack
- Merocel 8-10cm pack
- Syringe
- Saline
- Scissors
- Kidney dishes or bowl
- Tissues
- Tongue depressor

Position:
- Patient sits upright at 90° over edge of bed facing examiner, holding kidney dish/bowl

First aid:
- Compress the whole soft part of the nose for 10 minutes
- Assess and resuscitate, IV, bloods
- PPE and assemble equipment

Epistaxis equipment:
- Headlight
- Thudicum speculum
- Fraser ENT suction
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Pharmacy:
- Cophenylcaine (lignocaine and phenylephrine)
- Tranexamic acid

For elderly patients with recurrent bleeding on anticoagulation or antiplatelet consider topical vasoconstrictor spray 2 sprays each nostril 8 hourly for 48 hours after a bleed (oxymetazoline or Xylometazoline)

See Clancy ENT channel on YouTube for videos on how to use ointment in the nose (Nasalate) and first aid for epistaxis

Foley catheters for severe epistaxis: A rapid rhino with an anterior and posterior balloon is safer for the patient and easier to insert. If you do need to use a Foley catheter: insert into the nasal cavity, look into to the mouth to see the tip in the oropharynx, insert the balloon with 2-4ml of air then pull it forward to impact the balloon in the nasopharynx. Then pack both sides of the nose and secure the catheter with an umbilical clamp anterior to the pack. Risks include laryngeal airway obstruction and death, if catheter is not secured at the nostril and pressure necrosis of the nostril if umbilical clamp not padded at nostril.