Approved 9/2/26, Effective 1/15/27, replaces all prior versions

13C – VAGINAL BLEEDING/DISCHARGE ADULT & PEDIATRIC

EMERGENCY MEDICAL DISPATCHER
EMERGENCY MEDICAL RESPONDER
EMT
EMT-INTERMEDIATE 85
ADVANCED EMT
PARAMEDIC

TREATMENT PRIORITIES
1. Supportive care
2. IVF if needed for hypotension

EMD

ADVISE TO REST IN COMFORTABLE POSITION
ADVISE NO FOOD OR DRINK
ADVISE TO AVOID MOVEMENT UNLESS NECESSARY

EMR | **EMT**

GENERAL SUPPORTIVE CARE
OBTAIN VITAL SIGNS
O2 VIA NC OR NRB, AS APPROPRIATE

EXTERNAL GENITALIA EXAM ONLY IF ONGOING, ACTIVE BLEEDING WITH CONCERNS OF HEMODYNAMIC INSTABILITY

PLACE ABD PAD/VAGINAL PAD AS NEEDED

REPORT ANY CONCERNS/SUSPICIONS OF SEXUAL ASSAULT TO RECEIVING FACILITY PERSONNEL

EMT-I85 | **AEMT**

IV ACCESS
ADULT: IV NS TKO IF SYS BP ≥ 100 mmHg WITHOUT HYPOTENSIVE SYMPTOMS
ADULT: IV NS 250 mL BOLUS IF SYS BP <100 mmHg WITH HYPOTENSIVE SYMPTOMS IF NO SIGNS OF PULMONARY EDEMA,
ADULT: REPEAT UP TO 2 LITERS NS IF SYS BP REMAINS < 100 mmHg WITH HYPOTENSIVE SYMPTOMS & NO SIGNS OF PULMONARY EDEMA
PEDIATRIC: IV NS TKO IF SYS BP ≥ (70 + 2x age in years) mmHg
PEDIATRIC: IV NS 20 mL/kg BOLUS IF SYS BP < (70 + 2x age in years) mmHg IF NO SIGNS OF PULMONARY EDEMA

PARAMEDIC

CONTINUOUS ASSESSMENT & TREATMENT PER APPLICABLE PROTOCOL(S)