

Blood Sampling

Coag screen if anticoagulated OR suspected coagulopathy (e.g. liver disease)

FBC if significant bleeding/anaemia


St John's Transfer

G&S sample to be labelled and sent in bag with patient (different blood lab)

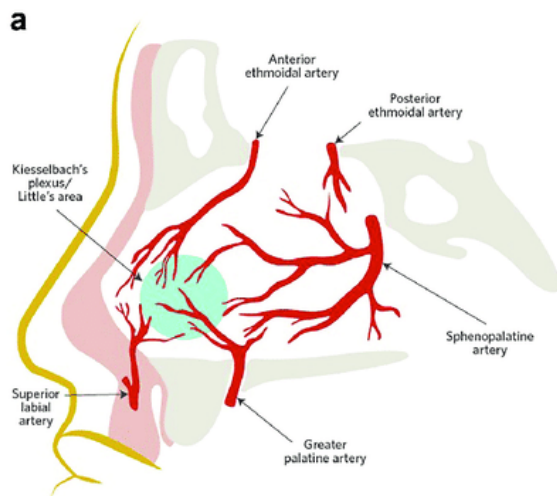
Discharge Prescription

NASEPTIN 4x/day for 10 days, contains PEANUT OIL

Mupirocin 2-3x/day for 5 days if peanut allergy

Epistaxis			Version 3.0	Page 2 of 6		
Document: ED Epistaxis	Published Date: 29 Nov 2025	Review Date: Nov 2027	Authors: Dr K Myers & Prof M Reed			

Epistaxis (Nosebleed)



Clinical Practice Guideline: Nosebleed (Epistaxis) - Scientific Figure on ResearchGate

Why is my nose bleeding?

Blowing the nose more often, picking the nose, and changes in air/altitude all contribute to nosebleeds. However, many people with high blood pressure and on blood thinning medicines find that their nosebleeds are more severe

What can I do about this?

First aid: as the picture on the right, pinch the soft part of the nose firmly and lean slightly forwards. This means that you swallow less blood and makes you feel less sick.

After a nosebleed, you should avoid:

- Blowing the nose for 1 week
- Picking the nose
- Sneezing: keep the mouth open
- Hot and spicy food/drinks and alcohol. These all make the blood vessels in the nose open up, making them more likely to bleed
- Heavy lifting, straining or bending over
- Vigorous activities for 1 week

The inside of the nose is coated in a mucus membrane: wet skin, like that of the mouth. It also has a very good blood supply.

These two things allow air entering the body to be humidified (have water added) and also catch any bugs which are breathed in.

Because there is a large blood supply, if there is damage to the skin of the nose, it can bleed a lot.



Most people have bleeding from the front of the nose (shown here), but some people have bleeding from the back of the nose.



Some people have an obvious blood vessel in the nose which has been cauterised (burned away) to try and stop it bleeding again in the future. This can give you black discharge (snot) for a few days but does not mean there is a problem.

RETURN TO HOSPITAL or seek medical advice if:

- You/your relative feels continuously lightheaded/dizzy
- Your nose bleeds for more than 15 minutes WHILE APPLYING PRESSURE

Epistaxis			Version 3.0	Page 3 of 6	 
Document: ED Epistaxis	Published Date: 29 Nov 2025	Review Date: Nov 2027	Authors: Dr K Myers & Prof M Reed		

Nasal Packing for Nosebleeds | Patient Information Leaflet

Emergency Department and Department of Ear, Nose, and Throat (ENT) Surgery

Royal Infirmary Edinburgh & St.John's Hospital, Livingston, EH546PP

What is a nasal pack?

A nasal pack is a specially designed device inserted in your nose to stop nosebleed.

Going home with a nasal pack

Some patients can go home with a nasal pack and come back to the ENT department for removal. This takes place between 1 to 2 days after the nasal pack has been left in your nose. Further examination of your nose, commonly with an rigid camera, is carried out then. Patients often go on to receive cauterisation of the blood vessel or area responsible for nosebleed.

Is it normal to experience pain or discomfort?

It is entirely normal to experience pain or discomfort once a nasal pack has been inserted. Remember to take regular painkillers such as paracetamol, and/or codeine to help with the pain.

Can I still have nosebleed with nasal pack in my nose?

You will not be sent home with active bleeding. However, it is normal to have a trickle or ooze of blood (can be mixed with nasal mucous). If you experience continuous active bleeding through the other nostril, mouth and/or corner of your eye(s), you will need to attend the emergency department.


Will I go home with medications?

You can ask for paracetamol and/or codeine to help with pain. Patients are often asked to take regular paracetamol to help with pain.

Sometimes, patients may be prescribed oral tranexamic acid, which is a medicine that helps to maintain blood clots. You should take the medicine as prescribed until you are told to stop by ENT specialist, or if you develop side effects.

What are the side effects of tranexamic acid?

If you develop any of the following side effects, stop taking tranexamic acid and speak to your GP/call the ENT clinic or ward on the numbers provided:

Epistaxis			Version 3.0	Page 4 of 6		
Document: ED Epistaxis	Published Date: 29 Nov 2025	Review Date: Nov 2027	Authors: Dr K Myers & Prof M Reed			

- Diarrhoea
- Nausea and/or vomiting
- Swelling, redness or pain in your lower leg

Do's and Don'ts once you have been discharged with a nasal pack

Do:

- ☒ Ensure you attend the ENT Specialist appointment for removal of nasal pack
- ☒ Ensure you take regular painkillers to help with the discomfort or pain of nasal pack
- ☒ Avoid bending forwards, lifting heavy objects or exerting yourself

Don't:

- ☒ Do not pull or try to adjust the nasal pack
- ☒ Do not blow your nose
- ☒ Do not breathe in tobacco smoke or other fumes that may irritate your nose.
- ☒ Do not take hot drinks, food

Nasal pack details

Date of insertion:

Time of insertion:

Emergency department:

Contact numbers

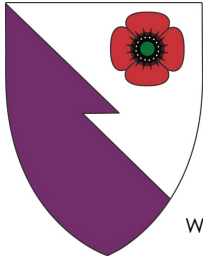
ENT ward: Ward 19a, St.John's Hospital - 01506 524119

Epistaxis			Version 3.0	Page 5 of 6		
Document: ED Epistaxis	Published Date: 29 Nov 2025	Review Date: Nov 2027	Authors: Dr K Myers & Prof M Reed			

RCEM Epistaxis Safety Flash

[https://res.cloudinary.com/studio-](https://res.cloudinary.com/studio-republic/images/v1635677125/Safety_Flash_complication_silver_nitrate_epistaxis_2020/Safety_Flash_complication_silver_nitrate_epistaxis_2020.pdf?_i=AA)

[republic/images/v1635677125/Safety_Flash_complication_silver_nitrate_epistaxis_2020/Safety_Flash_complication_silver_nitrate_epistaxis_2020.pdf?_i=AA](https://res.cloudinary.com/studio-republic/images/v1635677125/Safety_Flash_complication_silver_nitrate_epistaxis_2020/Safety_Flash_complication_silver_nitrate_epistaxis_2020.pdf?_i=AA))




**The Royal College of
Emergency Medicine**

Clinical Case Learning

With thanks to Dr Jonathan Carter, the patient and ANP Kirsty Hamilton

(August, 2020)

**A runny nose -
Localised cutaneous
argyria after nasal
cautery**





A patient with epistaxis had nasal cautery in the ED with silver nitrate. Reattended hours later with indelible staining of skin around nose, but away from the area of cautery (see photo). Silver nitrate is transferred distally post procedure by nasal mucosal discharge & ciliary action.

Silver nitrate staining of the skin after nasal cautery is a rare but avoidable complication. Staining eventually fades with gentle exfoliation but may take weeks to months. This could have litigious implications if in a cosmetically important area.

Good Practice Points for nasal cautery:

- Spray with topical anaesthetic/vasoconstrictor.
- Dry around the area with [cotton bud](#).
- When using silver nitrate, start from the edge of the bleeding point and move centrally in a radial fashion.
- Dry around the area again if necessary.
- Apply Naseptin (check no peanut allergy) or soft paraffin in and around nostril.

For Safety Alerts and RCEM issued Safety Flashes see:
www.rcem.ac.uk/SafetyAlerts

Epistaxis			Version 3.0	Page 6 of 6	 
Document: ED Epistaxis	Published Date: 29 Nov 2025	Review Date: Nov 2027	Authors: Dr K Myers & Prof M Reed		