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Yeah for TXA! implementation of heavy menstrual bleeding protocol in pediatric emergency

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Adolescents may suffer from heavy menstrual bleeding (HMB) in the first two years from menarche to established ovulatory cycles. Menorrhagia can impact school, social, and occupational performance. Safe treatment options are available for HMB in the adolescent population. Patients may experience delays due to pending investigations, consultation waitlists, and inexperience with treatment in the adolescent population. In this quality improvement project, we completed a 12-month review of cases of HMB presenting to BC Children's Hospital Emergency Department. From this result, 15% had mild anemia, 15% had moderate anemia, with 85% presenting hemodynamically stable. There

were no diagnoses of bleeding disorders in those presenting for emergent assessment. A multidisciplinary team comprised of emergency medicine, pediatric and adolescent gynecology, hematology, pharmacy, and pediatrics met to determine best practice for initial work-up, treatment and consultation. A HMB protocol was developed that could be initiated in the emergency room for mild, moderate, and severe anemia. This protocol has well received and is now available province-wide. We have reduced unnecessary investigations, time to first medication, and streamlined consultation process.

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