

Nosebleed (Epistaxis)

Nosebleeds (epistaxis is the medical term for nosebleed) are common and are usually not a cause for concern. They come from the many small blood vessels that line the inside of your nose. Their job is to warm and moisten the air you breathe. These blood vessels can break and bleed either from picking, rubbing, or blowing your nose, from dry air, or from inflamed tissues when you have a cold or allergies.

There are two types of nosebleeds. The most common kind of nosebleed is from the front of the nose. The second kind of nosebleed is from the deeper part of the nose where the blood vessels are larger and can bleed more. This can be harder to stop than nosebleeds from the front of the nose.



Image from Cleveland Clinic



What to Expect

Treatment of your nosebleed in the Emergency Department will vary. A lot of nosebleeds often stop on their own with pressure and require no further treatment. However, sometimes a nosebleed needs packing. Some get cauterized (seal the blood vessels with a chemical or electric current - electrocautery). If you had packing materials placed in your nose, you will need to follow up with a health care provider to have the packing removed in 24 to 48 hours. You may need more treatment if you get nosebleeds a lot.

Recommended Follow-Up

Follow up in ___ days.

Name of Provider

Reason

Date/Time

Location

Contact Info



When to Get Help

Go to the nearest Emergency Department or Urgent Care Centre if:

- You feel lightheaded, dizzy, or faint.
- If you are bleeding even though you have packing in your nose (bleeding around the packing).

- Your nose is still bleeding after you have pinched the nose shut 2 times, and for 15 minutes each time (30 minutes total) and you cannot get to a clinic in next hour.
- There is a lot of blood running down the back of your throat even after you pinch your nose and tilt your head forward.

Go to a walk-in clinic, your health care provider, or call 811 (711) if:

- Your nose is still bleeding after you have pinched the nose shut 2 times, and for 15 minutes each time (30 minutes total).
- You get nosebleeds often, even if they stop on occasion.
- You get bruising and bleeding from other sites of the body in addition to nosebleeds.

To Learn More:

- Ask your health care provider.
- HealthLinkBC - call 8-1-1 (7-1-1 for deaf or hard of hearing) or go online to www.HealthLinkBC.ca.



How to Care for Yourself at Home

Rest for 12 hours after your nosebleed:

- **DO NOT** sniff or blow your nose.
- **DO NOT** put anything else inside your nose.
- **DO NOT** lift heavy objects or strain.

If your nose starts to bleed again, follow these steps to stop the bleeding:

- Get some tissues or a damp cloth.
- Sit down.
- Tilt your head forward so the blood drains out your nose and not down your throat.
- Breathe through your mouth.
- Using your thumb and index finger, firmly squeeze the soft part of your nose just below the bony part to put pressure on the middle part of your nose (called the septum). This is usually where the bleeding is coming from.

Nosebleed/Epistaxis Discharge Instructions - continued

- Use the tissues or cloth to catch the blood.
- Keep squeezing for 15 minutes before checking to see if the bleeding has stopped.
- If it is still bleeding, hold your nose again for another 15 minutes.
- Placing a cold cloth or ice pack across your nose can sometimes help to slow the bleeding.
- Many nosebleeds stop after 15 to 20 minutes of squeezing the soft part of the nose.

Ways to Prevent Nosebleeds

Keep the inside of your nose from drying out:

- Lightly coat the inside of your nose with a lubricant such as petroleum jelly (Vaseline) by placing a small amount on a cotton swab and gently rub the cotton tip inside each nostril. A water-based nasal gel (e.g., NasoGel/Secaris) may also be useful.
- Use saltwater (saline) nose drops or spray as directed by your doctor.
- Use a humidifier at night in your bedroom.
- Try not to take antihistamine medicines or use decongestant nasal sprays.
- Avoid aspirin, Ibuprofen (Advil[®], Motrin[®]) other NSAID medications like naproxen (e.g., Aleve[®]) or celecoxib (e.g., Celebrex[®]) unless approved by your doctor/pharmacist. Use acetaminophen (Tylenol) for pain relief.
- Open your mouth when you sneeze. (Don't forget to cover your sneeze by sneezing into your elbow or shoulder!)
- When you blow your nose, always blow gently.

Pain Control

- There can be some discomfort if you had blood vessels burned (cauterized) or packing placed.
- Again, avoid aspirin and NSAIDs as above.

ACETAMINOPHEN (E.G. TYLENOL[®])

- 500-1000mg every 6 hours as needed while awake, with water (max. 4000mg/day).

Notes:

Nosebleed/Epistaxis Discharge Instructions - continued

If you have liver disease or drink more than 3 alcoholic beverages per day:

- Maximum dose: 3000mg per day.

Do not use this medicine for longer than 5-7 days. Speak to your primary care provider if you need to use this for longer.

Be careful not to exceed the maximum dose when taking this medication with other medication that contain acetaminophen (e.g., Dayquil/Nyquil®).

Notes:

Additional Information

- Nosebleed article (HealthLink BC):
<https://www.healthlinkbc.ca/health-topics/nosebleeds>
- Instructions for care at home (Video):
<https://sunnybrook.ca/glossary/item.asp?g=9&c=0&i=1449&page=26008>

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https://emergencycarebc.ca/clinical_resource/patient-information-sheet/epistaxis/

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The information in this document is intended solely for the person to whom it was given by the health care team. This information does not replace the advice given to you by your health care provider.

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