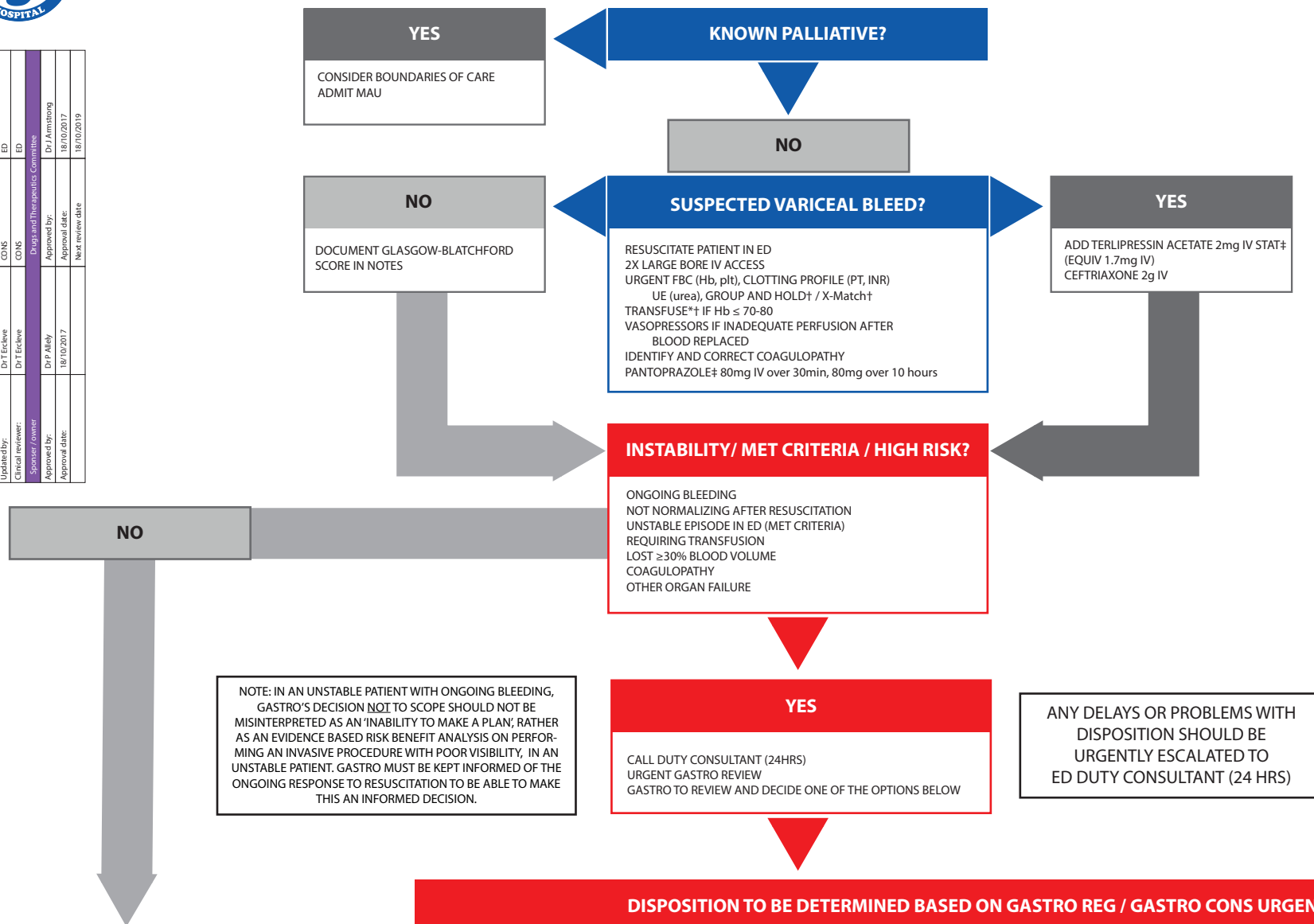




UPPER GI BLEED PROTOCOL SCGH ED v2.1

Role	Name	Position	Service
Author:	Dr. Bendall / Baker / Jeffrey	EMO / CONS / CONS	ED / ICU / GASTRO
Updated by:	Dr T Eccle	CONS	ED
Clinical reviewer:	Dr T Eccle	CONS	ED
Sponsor / Owner:	Dr P Alley	Drugs and Therapeutics Committee	
Approved by:	Dr J Armstrong	Approved by:	Dr J Armstrong
Approval date:	18/10/2017	Approval date:	18/10/2017
		Next review date:	18/10/2019



GLASGOW-BLATCHFORD SCORE (severity index for non-variceal bleeds)

Haemoglobin	<10	≥10	<12	≥12	<13	≥13		
M	6 points	3 points	1 point	0 points				
F	6 points	3 points	1 point	0 points				
BUN	>25	≤25	>10	<10	>8	≤8	>6.5	≤6.5
	6 points	4 points	3 points	2 points	1 point	0 points		
Initial Systolic BP	<90	90	99	100	109	>109		
	3 points	2 points	1 point	0 points				
Pulse	≥100	<100						
	1 point	0 points						
Presentation with melena	Yes	No						
	1 point	0 points						
Recent syncope	Yes	No						
	1 point	0 points						
Hepatic disease history	Yes	No						
	1 point	0 points						
Heart failure history	Yes	No						
	1 point	0 points						

Score >5 => >50% risk for intervention (or death)

MET CRITERIA

AIRWAY	THREATENED
BREATHING	36 < RR < 5
CIRCULATION	140 < HR < 40
	SBP < 90
NEUROLOGY	GCS FALL > 2
	SEIZURE REPEAT / PROLONGED
URINE	<100ML IN 3 HRS

* Consider higher value if underlying comorbidities or suggestions of ongoing bleeding

† Check Jehovah's Witness status (some JW may consent to blood products)

‡ Gastroenterology Therapeutic Guidelines 2014

** Consider theatres if anaesthetics involved / airway issues

DISPOSITION TO BE DETERMINED BASED ON GASTRO REG / GASTRO CONS URGENCY OF SCAN

SCOPE NOT URGENT

REFER TO MAU
ADMIT TO WARD
0800-2200 MAU TO INFORM GASTRO
2200-0800 MAU INFORM GASTRO AT 0800

SCOPE TO BE DONE >1 WORKING DAY

REFER TO MAU
ADMIT TO WARD
GASTRO TO DOCUMENT CLEARLY
REASON FOR NOT DOING MORE URGENTLY
ALTERED MET CRITERIA / TARGETS
CRITERIA TO ESCALATE TO URGENT SCOPE
EXPECTED TIME OF SCOPE / REASON FOR NOT SCOPING / BLUE FORM

SCOPE TO BE DONE WITHIN 1 WORKING DAY

REFER TO ICU (ICU CAN DELEGATE TO HDU
IF MORE APPROPRIATE)
GASTRO TO DOCUMENT CLEARLY
REASON FOR NOT DOING MORE URGENTLY
ALTERED MET CRITERIA / TARGETS
CRITERIA TO ESCALATE TO URGENT SCOPE
EXPECTED TIME OF SCOPE

SCOPE LIKELY TO BE DONE WITHIN 2HRS (DAY) OR SCOPE TEAM HAS BEEN CALLED IN (NIGHT)

SCOPE TO BE DONE IN ICU
REFER TO ICU (ICU CAN DELEGATE TO HDU
IF MORE APPROPRIATE)
GASTRO TO DOCUMENT CLEARLY
INDICATION FOR IMMEDIATE SCOPE
EXPECTED TIME OF URGENT SCOPE
CONSIDER MINNESOTA TUBE IN ICU OR
REFER TO INTERVENTIONAL RADIOLOGY / SURGERY

SCOPE TO BE DONE IN ENDOSCOPY SUITE OR THEATRES
KEEP IN ED UNTIL ENDOSCOPY SUITE OR THEATRES READY **