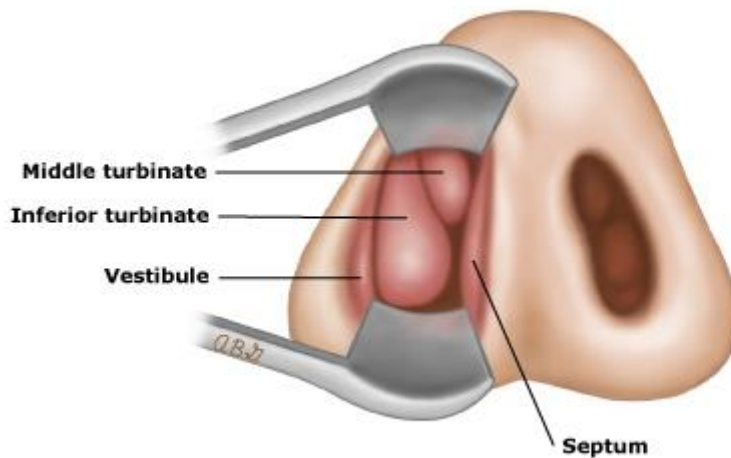
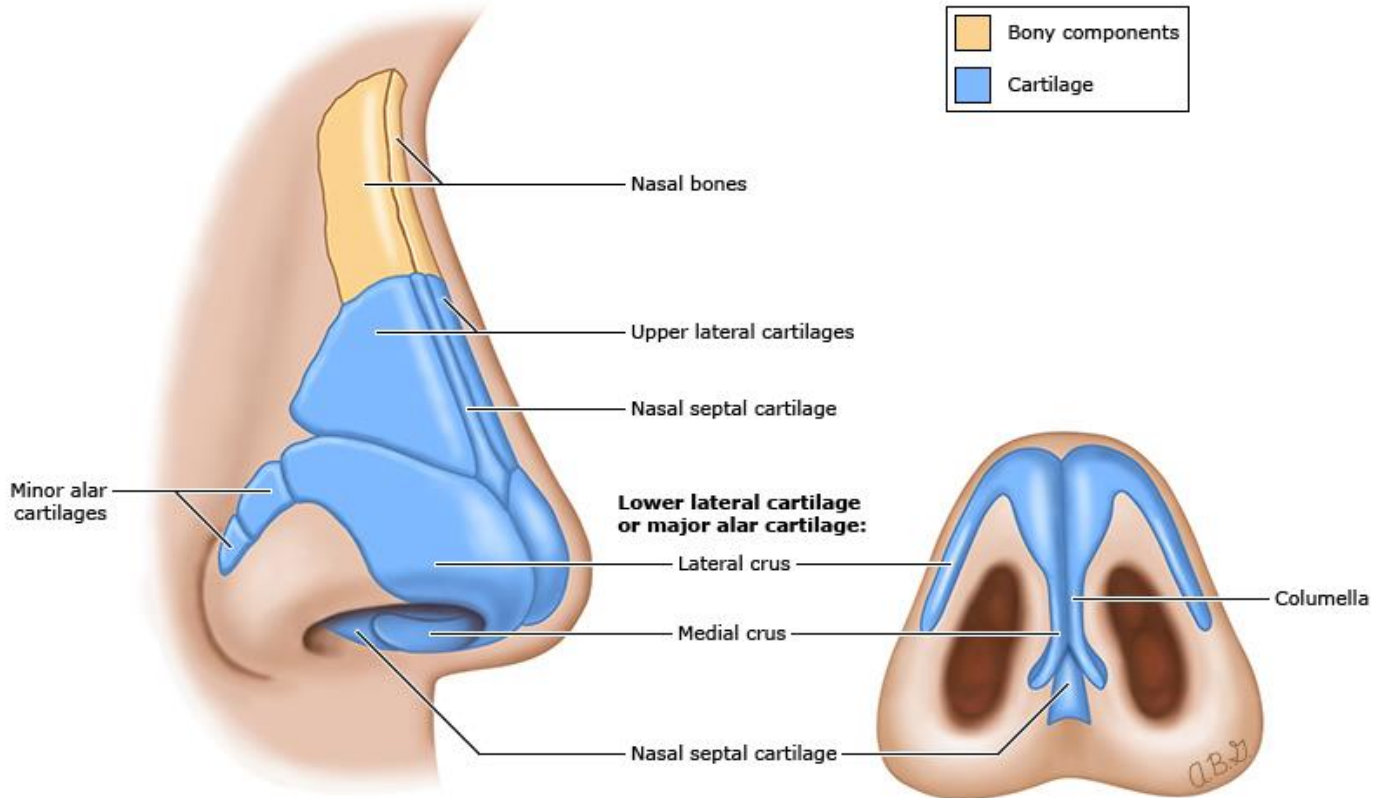


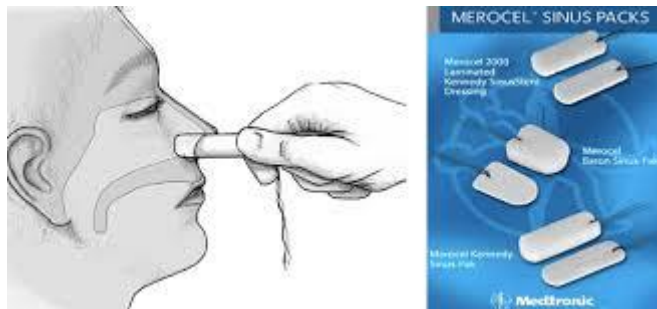
# Appendix 1

## Packing noses tips for epistaxis

### 1. Anatomy of external nose:



2. Merocel insertion: This is a sharp around the edges packing method, be conscious of traumatic insertion, co-phenylcaine spray around +- apply Lubricating jelly/Kenacomb. Post insertion you need to inject it with sterile water to increase in size around the nostril's anatomy

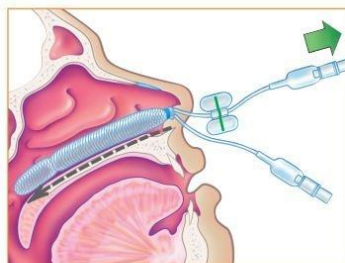


3. Rapid Rhino insertion: (Note 3 different sizes: Anterior-5.5cm, Anterior/Posterior-7.5cm and Posterior double cuff-green cuff is posterior).

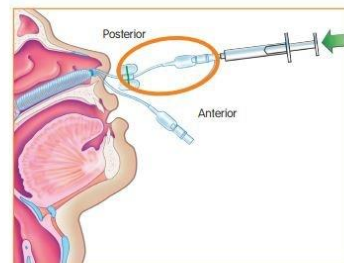
Product usage directions



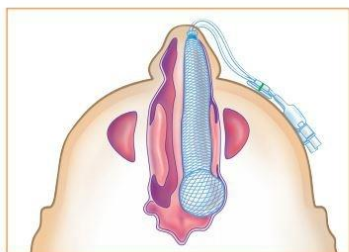
1 Soak in sterile water for 30 seconds.



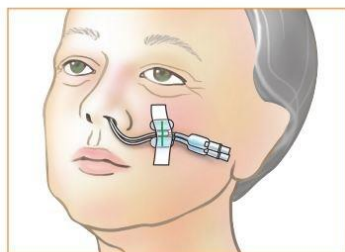
2 Insert along superior aspect of the hard palate until the blue indicator is past the nares.



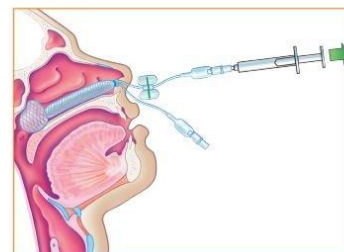
3 Inflate posterior balloon 1st (green line indicator) with air.



4 Inflate anterior balloon and ensure both pilot cuffs are firm.

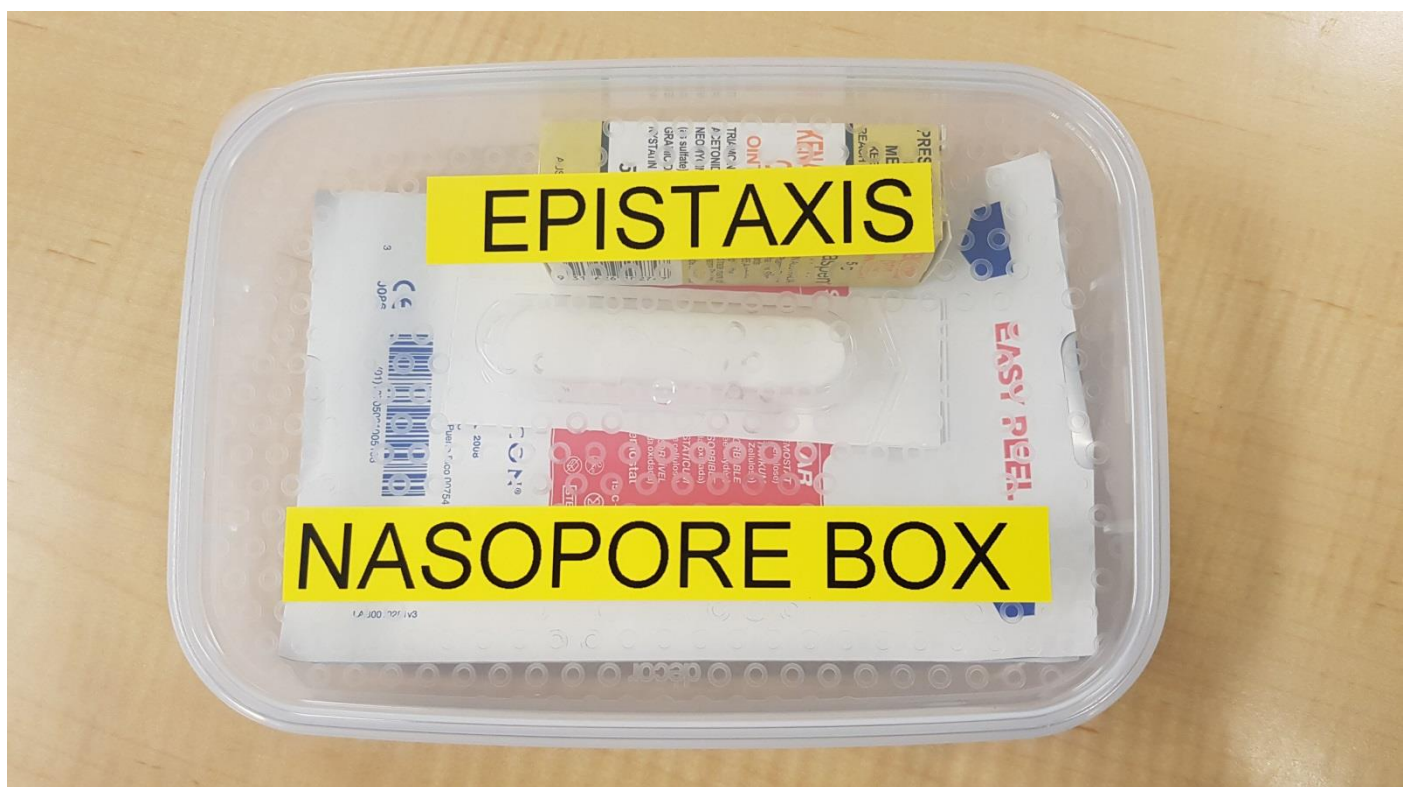


5 Discharge patient after a minimum of 15-20 minutes. Re-inflate to insure proper pressure and tape to patient's cheek.

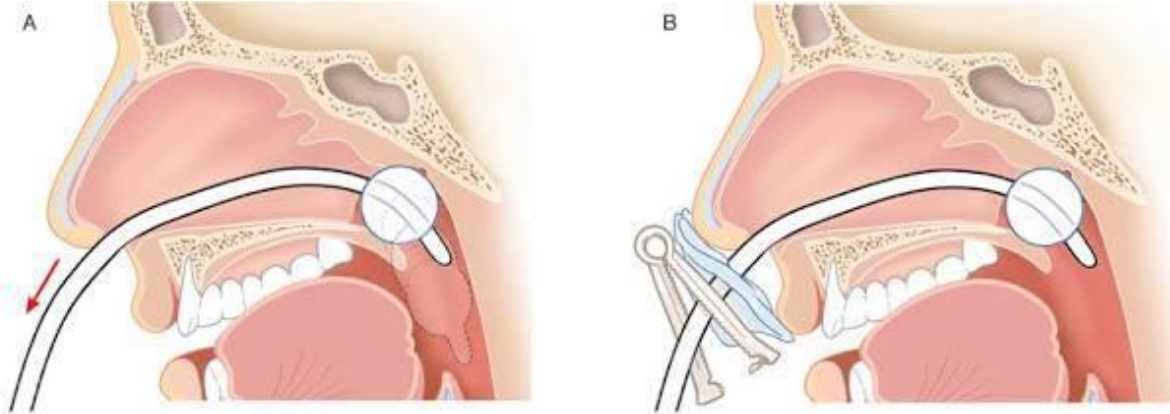


6 Removal should occur 24-72 hours after treatment.

4. Anatomical difficult nostrils to pack (deviated septum, nostrils bone spurs...)  
Nasopore insertion box in fridge at fast track: co-phenylcaine spray around & apply Kenacomb. This is a dissolvable dressing & does not need removal. Patient can start flushing nostrils with saline spray (FESS) daily until it dissolves, 2 days after insertion. Nasopore can be trimmed to go around spurs and continue to pack in segments. First cauterize if visual, surgicel-haemostatic dressing against bleed to form a gel and then nasopore packing with kenacomb.



5. Posterior bleeds that do not stop with rapid rhino double cuff insertion need foley catheter insertion (FR12-14) traction applied until the balloon seats against the posterior choana to tamponade bleeding. Be careful about clamps putting pressure against the alae of the nostril, causing pressure necrosis. Use the tip of the catheter to distance the clamp and apply gauze around it, to prevent nasal ala & columella necrosis.



Source: Reichman EF: *Emergency Medicine Procedures*, Second Edition; www.accessemergencymedicine.com. Copyright © The McGraw-Hill Companies, Inc. All rights reserved.

