

Bleeding, bruising

(March 2022)

Rationale

Minor localized bleeding or bruising is a common patient presentation and is often idiopathic in nature and/or self-limiting. However, excessive or prolonged bleeding or bruising can be associated with potentially serious underlying pathology, in which case urgent management may be required. Note that bleeding specifically related to major organ systems is covered under other objectives (e.g., 6-1, 6-2, 112).

Causal Conditions

(list not exhaustive)

- Mechanical (e.g., epistaxis) or traumatic (e.g., abrasion, laceration) localized bleeding
- Idiopathic localized bleeding
- Hemostasis disorders
 - a. Platelet or blood vessel disorders (e.g., von Willebrand disease, collagen disorder, medication-induced)
 - b. Coagulation disorders (e.g., factor VIII or vitamin K deficiency, fibrinolysis)

Key Objectives

Given a patient presenting with bleeding or bruising, the candidate will complete a relevant history and physical examination and order pertinent investigations to determine the most likely diagnosis. The candidate will initiate an appropriate management plan. In particular, the candidate should differentiate between minor self-limited causes of the bleeding versus potentially more serious hemostasis issues, which may require urgent management.

Enabling Objectives

Given a patient with bleeding or bruising, whether localized, widespread, minor, or major, the candidate will

- list and interpret critical clinical findings, including
 - a. findings from an appropriate history and physical examination performed with particular attention to
 - airway and hemodynamic status; and
 - differentiation between various disorders of hemostasis and self-limited and/or idiopathic bleeding (e.g., epistaxis);
- list and interpret relevant investigations (e.g., complete blood count, coagulation studies); and
- construct an effective initial management plan, including
 - a. initiating immediate management of bleeding (e.g., nasal packing, suturing, medication dosage adjustment, intravenous resuscitation if hemodynamically unstable);
 - b. providing counselling/education on how to prevent future episodes; and
 - c. determining whether specialized care is required.