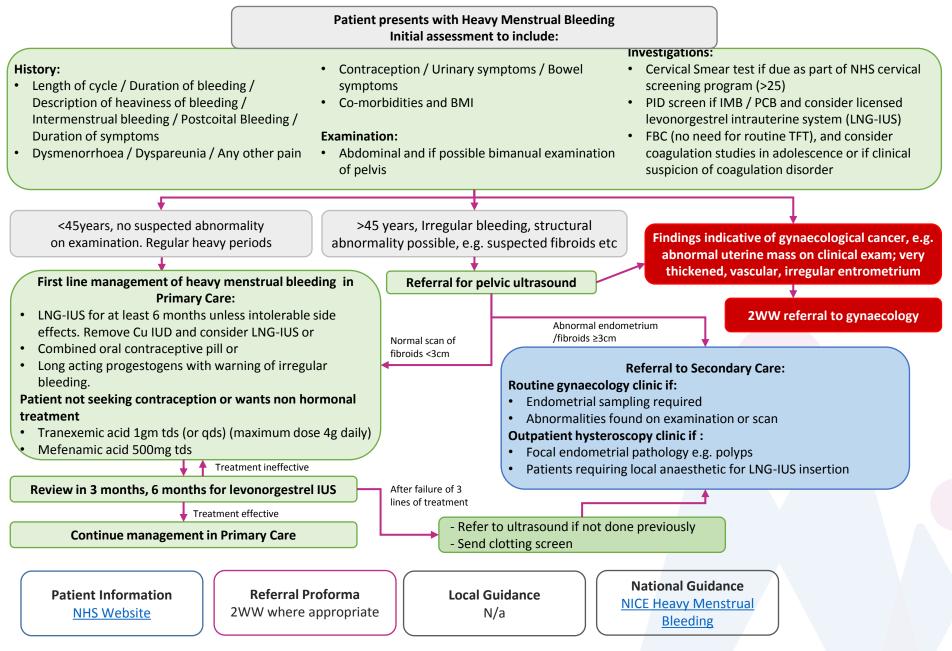
## Pathway Guide – **Bleeding: Heavy Menstrual**



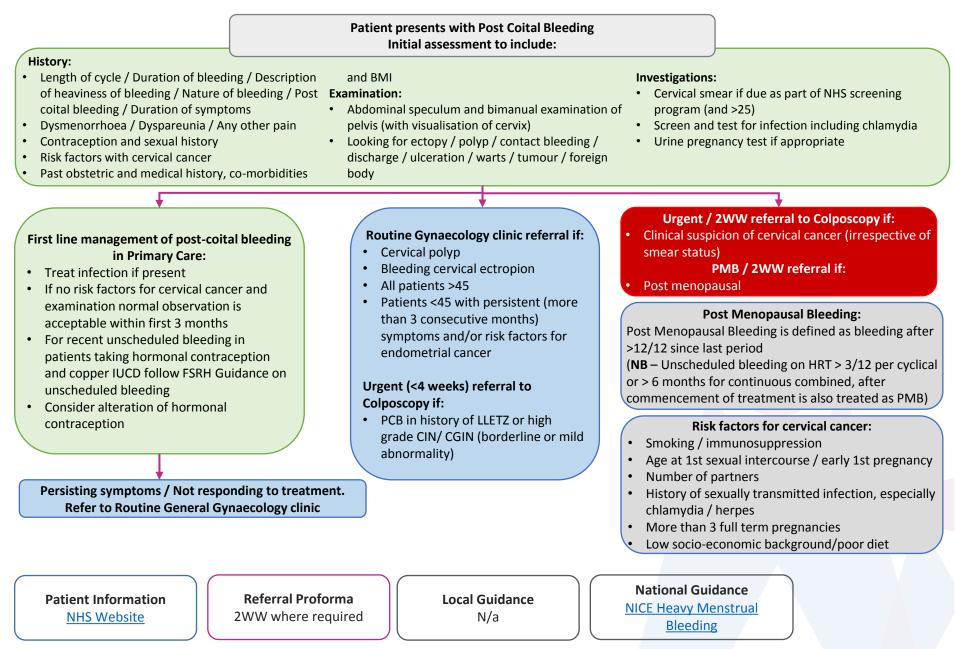
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## Pathway Guide – <u>Bleeding: Inter-menstrual</u>

	Patient presents with Intermenstrual Bleeding Initial assessment to include:	
<ul> <li>History:</li> <li>Length of cycle / Duration of bleeding / Description of heaviness of bleeding / Intermenstrual bleeding / Postcoital Bleeding / Duration of symptoms</li> <li>Dysmenorrhoea / Dyspareunia / Any other pain</li> <li>Contraception and sexual history</li> <li>Risk factors with cervical cancer</li> </ul>	<ul> <li>Past obstetric and medical history, co-morbidities and BMI</li> <li>Urinary symptoms / Bowel symptoms</li> <li>Examination:         <ul> <li>Abdominal, speculum and bimanual examination of pelvis (with visualisation of cervix)</li> <li>Looking for ectopy / polyp / contact bleeding /</li> </ul> </li> </ul>	<ul> <li>discharge / ulceration / warts / tumour / foreign body</li> <li>Investigations: <ul> <li>Cervical smear if due as part of NHS cervical screening program(and &gt;25)</li> <li>Screen and test for infection including chlamydia</li> <li>Urine pregnancy test if appropriate</li> </ul> </li> </ul>
<ul> <li>First line management of intermenstrual bleeding in Primary Care:</li> <li>Treat infection if present</li> <li>NB Intermenstrual bleeding acceptable within first 3 months of hormonal treatment.</li> <li>Recent intermenstrual bleeding in patients taking hormonal contraception and Cu IUD follow FSRH Guidance on unscheduled bleeding.</li> <li>Consider alteration of hormonal contraception</li> </ul> Persisting symptoms / Not responding to treatment. Refer to Routine General Gynaecology clinic	<ul> <li>Routine gynaecology clinic if: <ul> <li>Cervical polyp</li> <li>Bleeding cervical ectropion</li> </ul> </li> <li>Direct referral to Hysteroscopy clinic if: <ul> <li>All patients &gt;45</li> <li>Patients &lt;45 with persistent (more than 3 consecutive months) symptoms and/or risk factors for endometrial cancer</li> </ul> </li> <li>Urgent (&lt;4 weeks) referral to Colposcopy if: <ul> <li>IMB in history of LLETZ or high grade CIN/CGIN</li> </ul> </li> </ul>	<ul> <li>Urgent / 2WW referral if:</li> <li>Clinical suspicion of cervical cancer (irrespective of smear status)</li> <li>Risk factors for cervical cancer:</li> <li>Smoking / immunosuppression</li> <li>Age at 1st sexual intercourse / early 1st pregnancy</li> <li>Number of partners</li> <li>History of sexually transmitted infection, especially chlamydia / herpes</li> <li>More than 3 full term pregnancies</li> <li>Low socio-economic background/poor diet</li> </ul>
Patient Information         Referral Providence <u>NHS Website</u> 2WW if meeters		National Guidance NICE Heavy Menstrual Bleeding

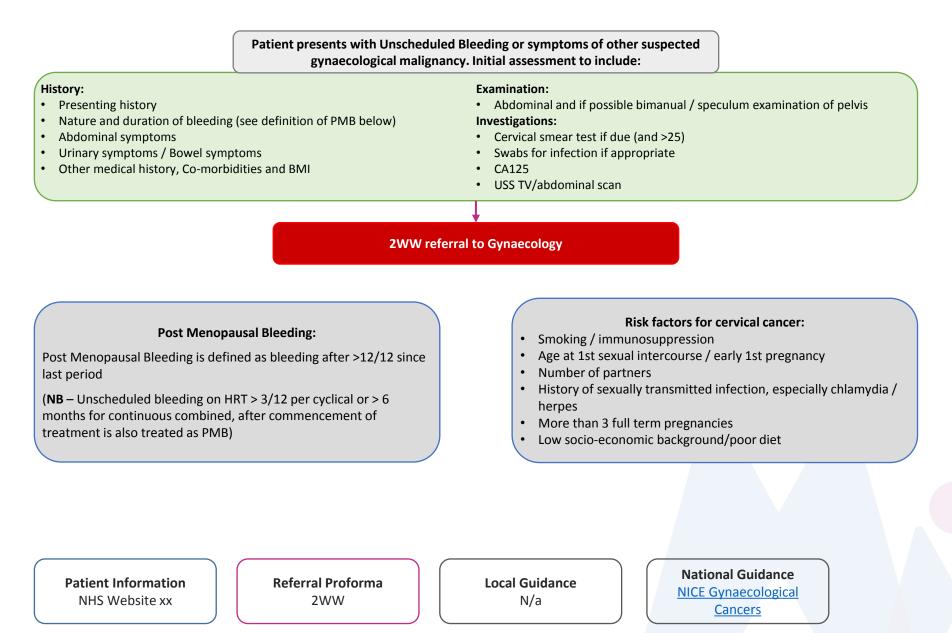
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## Pathway Guide - Bleeding: Post Coital



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## Pathway Guide – <u>Suspected Gynaecological Malignancy (inc. PMB)</u>



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