

## Appendix VIII

### Management Guidelines for a Carotid Bleed at Home or in the Community.

**Rationale:** Carotid artery rupture, a potentially fatal complication occurs in 3-12% of patients who have cancer of the Head and Neck. Because of its infrequency, appropriate management may be delayed by physicians and nurses unaccustomed to this problem.

**GOAL:**

To provide comfort for the patient and family during this potentially frightening event.

To manage and minimize the effects of complications if the patient and family have decided, after discussion earlier in the disease process, that no resuscitative measures are to be undertaken.

**OR**

To increase the success of patient survival if the patient and family have decided earlier in the disease process that all resuscitative measures are to be taken.

1. Discuss with the patient and /or family the possibility of a carotid bleed and make a plan of action.
  - ensure family members know what to expect
  - obtain some dark towels and disposable gloves
  - inform family and Family Doctor of risk potential
  
2. In the event of a bleed, stay calm!!

3. Return patient to bed or chair with head elevated.
4. Place dark towel over patient's upper body to minimize the visual impact of the bleeding.
5. Call 911 if the patient is to be resuscitated or if the family wishes to have the patient transferred to hospital.
6. Apply pressure to bleed site if possible.
7. Suction orally or via tracheostomy tube, if necessary to maintain airway and thus reduce patient distress.
8. Stay with the patient until bleeding stops, patient is transferred, or patient dies. Keep the family informed of the situation.

**If patient is to be resuscitated:**

**- Call 911 to get patient to nearest Emergency department for standard treatment of a major bleed. If it is deemed necessary at this point, the patient can be transferred to a tertiary care center for Vascular/ENT care and surgery.**

**-Start an IV with Ringers Lactate with a large bore needle if available.**

**- Explain this medical event clearly to Emergency Medical Personnel. They may not have seen many or may be unfamiliar with this type of bleed.**