

# Post-Menopausal Bleeding Primary Care Pathway

Quick links:

[Pathway primer](#)

[Expanded details](#)

[Provider resources](#)

[Patient resources](#)

## 1. History

Gather recent history, including:

- Evaluate bleed (pattern & quantity)
- Pregnancy risk / sexual history
- Assess risk factors for endometrial cancer

Risk factors for endometrial cancer:

- Age > 40 years
- Obesity (BMI > 30 kg/m<sup>2</sup>)
- Nulliparity
- Diabetes
- Current Tamoxifen use
- Polycystic ovarian syndrome w/irregular cycles
- Hereditary non-polyposis colorectal cancer
- Unopposed estrogen exposure

Patient profile:

- > 40 years old
- One year of no bleeding followed by new onset of vaginal bleeding

## 2. Physical exam

Vitals / general appearance

Vulva / vagina: Atrophic change or trauma

Bimanual exam

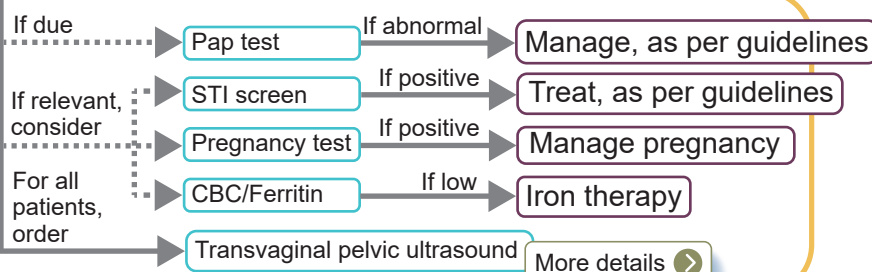
Speculum exam / inspect cervix

Red flags:

- Patient looks unwell
- Tachycardia/hypotension
- Flooding through >1 pad every hour
- Large uterine or cervical mass which is obstructing voiding
- Concerning cervical mass

Call RAAPID for gynecology or 911 if urgent

## 3. Investigations



## 4. Treat / manage

Referrals: Essential information to include:

- History exam, inc. pap results
- Lab & DI results
- Attempted treatments & outcome

