LEARNING OBJECTIVE
After this activity, the participant should be able to describe the triage of patients and the medical and endoscopic management of upper gastrointestinal bleeding.

QUESTION 1
A 75-year-old man with a history of coronary artery disease and stent placement 5 years ago presents with melena for the past 2 days. He has atrial fibrillation, type 2 diabetes, and hypertension. His medications include clopidogrel and warfarin.

Blood pressure: 110/65
Heart rate: 86
WBC: 8,900/μL
Hemoglobin: 7.1 g/dL
Platelets: 169,000/μL
INR: 1.9
BUN: 25 mg/dL
Creatinine: 1.1 mg/dL

What is the next best step in management?
A. Use of metoclopramide
B. Referral for transcatheter arterial embolization
C. Blood transfusion
D. Pre-endoscopic PPI therapy

QUESTION 2
A 42-year-old female with no significant past medical history presents with melena for the past 2 days. She reports taking a few doses of ibuprofen last week for headaches but otherwise no other non-steroidal anti-inflammatory drugs. She reports no chest pain, shortness of breath, dizziness, or lightheadedness. Her blood pressure is 120/65 and heart rate 86 bpm. There is brown stool on rectal exam.

Hemoglobin: 14.1 g/dL
Platelets: 169,000/μL
INR: 1.9
BUN: 8 g/dL
Creatinine: 0.8 g/dL

What is the best next step?
A. Urgent esophagogastroduodenoscopy within 24 hours
B. Blood transfusion
C. Outpatient follow-up
D. Admit for observation

QUESTION 3
A 65-year-old female with a history of type 2 diabetes and hypertension presents with melena. An esophagogastroduodenoscopy (EGD) yesterday revealed a 1-cm ulcer with a 2-mm bleeding visible vessel that was successfully treated with epinephrine and bipolar cautery. Today, the patient’s hemoglobin dropped from 10.2 g/dL to 7.5 g/dL. A repeat EGD showed recurrent gastric ulcer bleeding with a 3-mm bleeding vessel.

What is the next best step in management?
A. Hemoclip
B. Bipolar cautery
C. Argon plasma coagulation
D. Over-the-scope clip