

# Bleeding Disorder Referrals to Hematology Clinic: A single institution experience

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June 10, 2023

## Abstract

*Introduction* The evaluation for an inherited bleeding disorder can be challenging. Our hematology clinic receives hundreds of referrals annually for bleeding disorder evaluation due to bleeding symptoms and secondary to preoperative laboratory testing. *Aim* To characterize hematology referrals for bleeding disorder evaluation at our institution. To describe the diagnostic outcomes, estimate the proportion diagnosed, and identify referral factors that are associated with being diagnosed with a bleeding disorder. *Methods* This is a single center, retrospective chart review. Patients referred and or seen for a bleeding disorder evaluation from 07/1/2018 until 06/30/19 were included. AIC was applied to logistic regression to identify factors associated with diagnosis of bleeding disorder. *Results* Of the 373 subjects included, mean (SD) age was 8.3 (5.4) years, 210 (56.3%) female, 256 (69%) white and 69 (18%) black; 40 (11%) were diagnosed with a bleeding disorder and 255 ruled out. Of our referred sample, 6% (21/373) were diagnosed with von Willebrand disease, 4% (14/373) with a platelet function disorder, and 1% (4/373) with a coagulation factor deficiency. Forty percent of referrals were for preoperative clearance, 36% for family history, and 57% for symptoms. The odds of a bleeding disorder diagnosis decreased by 8% for every year increase in age and were 3 times higher among patients having abnormal coagulation labs at the time of referral as compared to their counterparts. *Conclusion* This study highlights predictive variables for the presence of an inherited bleeding disorder. These results may contribute to future large-scale studies.

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