Clinical history concerning for bleeding associated with thrombocytopenia or an underlying disorder of hemostasis (Table 2) or Current signs of coagulopathy (bleeding from IV sites, catheters; new mucocutaneous bleeding)

**NO**

**Etiology of thrombocytopenia**

- Unknown etiology
- Immune Thrombocytopenia
- Gestational Thrombocytopenia

**YES**

It may be reasonable to avoid neuraxial procedures (Class IIb, Level C-LD)

- Hypertensive disorders of pregnancy
  - Consistent with HELLP Syndrome?
    - NO
    - YES
      - Platelet count within 6 hours?
        - YES
        - NO
          - Consider repeat platelet count (Class IIb, Level C-LD)

**Is the platelet count ≥ 70,000 x 10⁶/L?**

**YES**

- Likely to be low risk for spinal epidural hematoma, May be reasonable to proceed with neuraxial procedure* (Class IIa, Level C-LD)

**NO**

- known etiology of thrombocytopenia
  - NO
  - YES

For cases with unknown etiology of thrombocytopenia, additional hematologic workup may be beneficial prior to proceeding with neuraxial procedures (Class IIb, Level C-LD)

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*Data are limited.
For platelet count between 50,000 and 70,000 x 10⁶/L, there may be scenarios when competing risks/benefits justify proceeding with neuraxial procedure* (Class IIb, Level C-LD)

For platelet count < 50,000 x 10⁶/L, there may likely be an increased risk of spinal epidural hematoma; it may be reasonable to avoid neuraxial procedure* (Class IIb, Level C-LD)

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*Assumes patient has no additional risk factors. Clinical context and competing risks might include, but are not limited to, the presence of high-risk comorbidities or difficult airway, the need for urgent or emergent general anesthesia, or the choice of neuraxial technique (i.e. spinal versus epidural anesthetic).

This consensus statement is not intended to set out a legal standard of care and does not replace medical care or the judgement of the responsible medical professional considering all of the circumstances presented by an individual patient. This statement is not intended to ensure a successful patient outcome in every situation and is not a guarantee of any specific outcome.