# Diagnostic Approach to Suspected Erythrocytosis

**Suspected erythrocytosis**

<table>
<thead>
<tr>
<th>PV-related features* present</th>
<th>PV-related features* absent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check EPO</td>
<td>Check EPO</td>
</tr>
<tr>
<td>INCREASED</td>
<td>LOW</td>
</tr>
<tr>
<td>Secondary erythrocytosis</td>
<td>NORMAL</td>
</tr>
<tr>
<td>Obtain bone marrow</td>
<td>PV</td>
</tr>
<tr>
<td>Diagnostic for PV</td>
<td>Nondiagnostic for PV</td>
</tr>
<tr>
<td>PV</td>
<td>Repeat EPO and Hb in 3 months</td>
</tr>
<tr>
<td>POSITIVE</td>
<td>NEGATIVE</td>
</tr>
<tr>
<td>Repeat EPO and Hb in 3 months</td>
<td></td>
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<td>PV</td>
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<tr>
<th>Hb &gt;18.5 g/dL (m) &gt;16.5 g/dL (f)</th>
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<td>Diagnostic for PV</td>
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<th>Hb &lt;18.5 g/dL (m) &lt;16.5 g/dL (f)</th>
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<td>Repeat EPO and Hb in 3 months</td>
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*PV-related features include portal vein thrombosis, Budd-Chiari syndrome, splenomegaly, erythromelalgia, persistent leukocytosis, thrombocytosis, or microcytosis, post-bath pruritus, and digital ischemia.

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