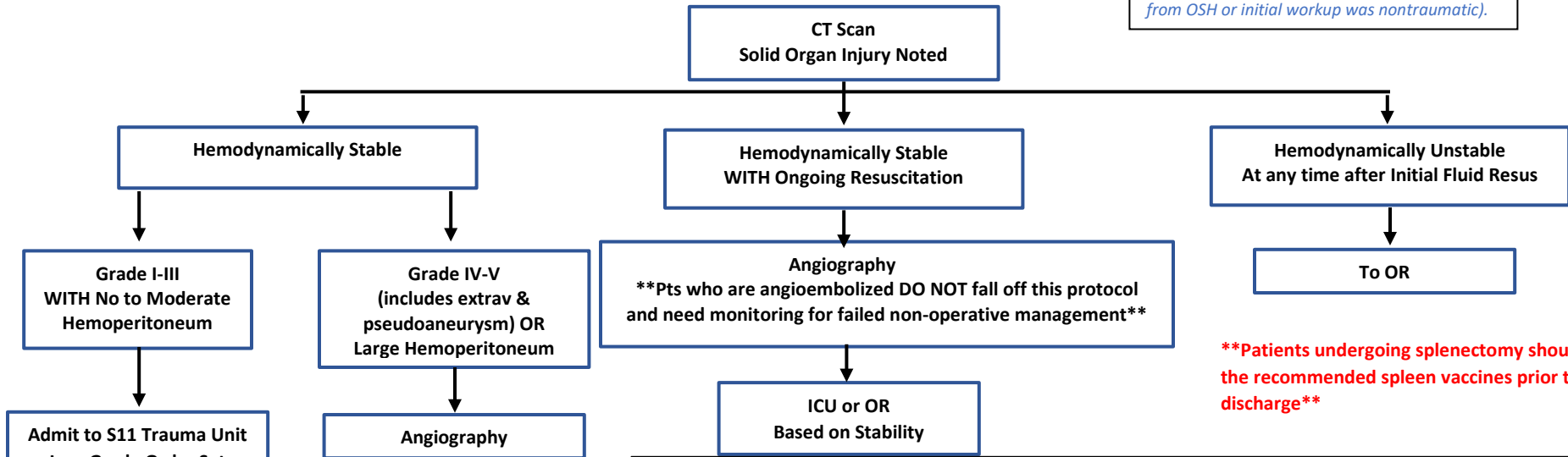


Clinical Practice Guideline Solid Organ Injury Management Adult

Consider repeat imaging with 2-phase CTA of the abdomen for patients who did not get this scan as part of initial workup (e.g. transfers from OSH or initial workup was nontraumatic).



****Patients undergoing splenectomy should receive the recommended spleen vaccines prior to discharge****

- Notes:**
- No NPO
 - No Activity Restriction
 - No Serial Hgb
 - No Repeat CT scan

Discharge Instructions

Activity:

- Nonvigorous, normal activity weeks 0-6
- Vigorous activity weeks 7-12
- High impact activity/sports after 12 weeks

Expect mild increase in abdominal pain 7-10 days after injury. Should return to baseline after 1-2 days.

Call if:

- New, unrelenting pain
- Frequent light-headedness
- Persistent pain after 2 weeks

	Low Grade Order Set	High Grade Order Set
Vital Signs	q2° x 4, then q4° x 24°	q2° x 4, then q4° x 24°
Urine Output	q shift	q 4°
IV Fluids	Maintenance rate	Maintenance rate
Diet	Regular	Regular
Lab	Hgb on admission and following day	Hgb on admission, 8 hrs after admission, then daily only at physician discretion
Serial Abdominal Exams	q4° x 3, and prior to discharge	q4° x3 & thereafter at physician discretion
Activity	Up ad lib	Up ad lib
Thresholds	Call MD for SBP <90, HR >120, significant change in abdominal exam	Call MD for SBP <90, HR >120, significant change in abdominal exam
Discharge Criteria	To home: Hemodynamically normal x 36°, no change in abdominal exam x36°	To floor: Normotensive with no tachycardia x 24°, average fluid requirements