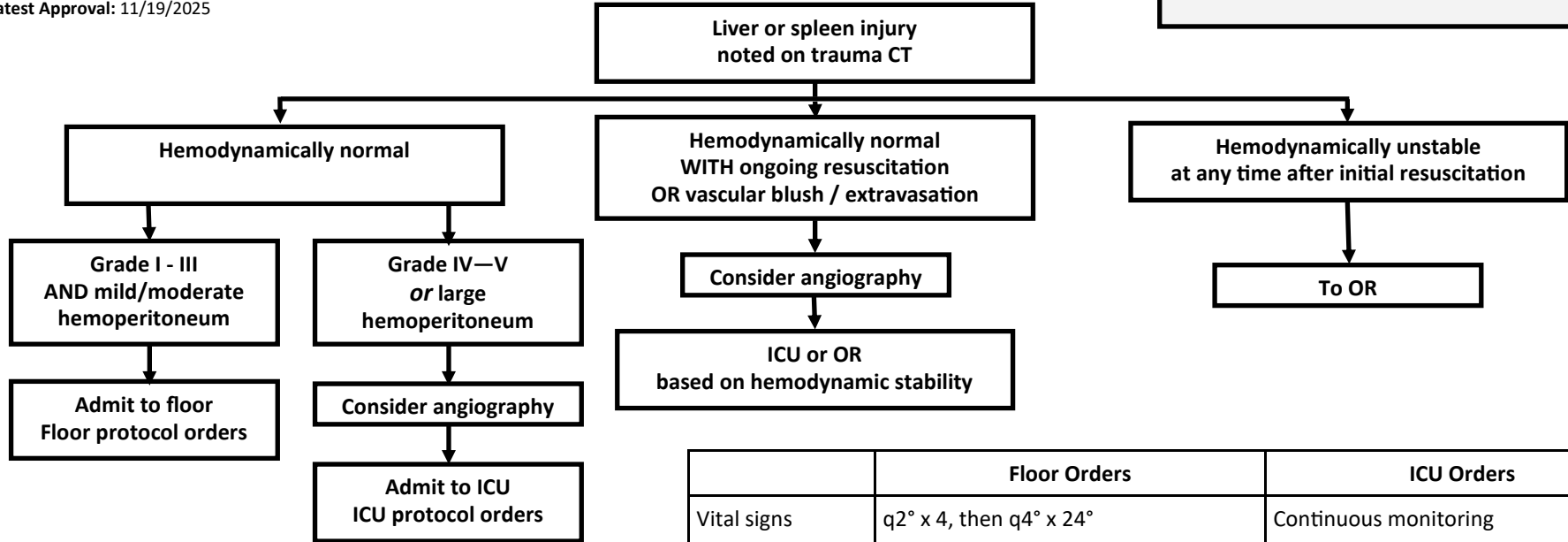


# Clinical Practice Guideline Blunt Liver And Spleen Injury

**PHYSICIAN CLINICAL JUDGEMENT  
SUPERSEDES THIS GUIDELINE**



	Floor Orders	ICU Orders
Vital signs	q2° x 4, then q4° x 24°	Continuous monitoring
Urine output	q4°	q1°
IV fluid	Maintenance rate	Maintenance rate
Diet	Regular	NPO
Lab	H/H on admission, q8° x 3	H/H on admission, q6° x 4, then daily per physician discretion
Activity	Per trauma surgeon discretion	Bedrest
Thresholds	Call MD for SBP<90, HR>100, significant change in abdominal exam	Call MD for SBP<90, HR>100, significant change in abdominal exam
Discharge criteria	To home: hemodynamically normal x36°, no change in abdominal exam x36°	To floor: normotensive with no tachycardia x24°

**Discharge Instructions**

**Activity Restrictions**

- Minimal activity weeks 0-6
- Non-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

**References:**

Diercks, D.B., & Clark, S.O. (2024). *Blunt abdominal trauma in adults: Initial evaluation and management*. UpToDate. [https://www.uptodate.com/contents/blunt-abdominal-trauma-in-adults-initial-evaluation-and-management?search=blunt%20abdominal%20trauma%20in%20adults%C2%A0&source=search\\_result&selectedTitle=1~150&usage\\_type=default&display\\_rank=1](https://www.uptodate.com/contents/blunt-abdominal-trauma-in-adults-initial-evaluation-and-management?search=blunt%20abdominal%20trauma%20in%20adults%C2%A0&source=search_result&selectedTitle=1~150&usage_type=default&display_rank=1)