# Updated APSA Blunt Liver/Spleen Injury Guidelines 2019

## Admission
- **ICU Admission Indicators**
  - Abnormal vital signs after initial volume resuscitation
- **ICU**
  - Activity - Bedrest until vitals normal
  - Labs – q6hour CBC until vitals normal
  - Diet – NPO until vital signs normal and hemoglobin stable
- **Ward**
  - Activity - No restrictions
  - Labs - CBC on admission and/or 6 hours after injury
  - Diet – Regular diet

## Procedures
- **Transfusion**
  - Unstable vitals after 20 cc/kg bolus of isotonic IVF
  - Hemoglobin < 7
  - Signs of ongoing or recent bleeding
- **Angioembolization**
  - Signs of ongoing bleeding despite pRBC transfusion
  - Not indicated for contrast blush on admission CT without unstable vitals
- **Operative exploration with Control of Bleeding**
  - Unstable vitals despite pRBC transfusion
  - Consider massive transfusion protocol

## Set Free
- Based on clinical condition **NOT** injury severity (grade)
- Tolerating a diet
- Minimal abdominal pain
- Normal vital signs

## Aftercare
- **Activity Restriction**
  - Restricting activity to grade plus 2 weeks is safe
  - Shorter restrictions may be safe but there is inadequate data to support decreasing these recommendations
- **Follow up Imaging**
  - Risk of delayed complications following spleen and liver injuries is low
  - Consider imaging for **symptomatic** patients with prior high grade injuries

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### ICU Activity
- Bedrest until vitals normal

### Labs
- CBC until vitals normal

### Diet
- NPO until vital signs normal and hemoglobin stable
- Regular diet

### Follow up Imaging
- Consider imaging for symptomatic patients with prior high grade injuries

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References