UCSD MEDICAL GROUP & CLINICAL GUIDELINES

DIAGNOSIS
Nonoperative splenic injury

CASE MANAGEMENT GOALS

PREADMISSION
ATLS protocol, work-up as mechanism and presentation dictate. Patient must be hemodynamically stable. Abdominal ultrasound/ CAT scan. Labs: ABG, Hgb, type and cross.

PREOPERATIVE

RECOVERY FACILITY
Dependent on needs at discharge (home vs. SNF vs. rehabilitation).

HOME
Regular diet. Restricted activity for three months total. Follow-up in clinic. May require home care follow-up.

DAY 1
SICU monitoring, serial exams and hematocrits 14-6h. NPO, IV fluids. Strict bed rest. Trauma Duplex Protocol ordered Venodynes. Pulmonary toilet.

DAY 2
SICU monitoring, serial exams and hematocrits q 6-8 hours. NPO, IV fluids. Strict bed rest. Venodynes. Pulmonary toilet.

DAY 3

DAY 4
IMU monitoring, serial hematocrits q 12-24h. Advanced diet, bathroom privileges as indicated. Venodynes. Pulmonary toilet.
DAY 5 IMU/Floor care, hematocrit q 24h. Advanced diet, bathroom privileges. Venodynes. Pulmonary toilet.


GOAL LENGTH OF STAY Seven days. If repeat scan shows ongoing resolution, can discharge with clinic follow-up. Exceptions: Unsatisfactory resolution of organ injury, associated injuries requiring additional treatment. Clinic follow-up every week x 6 weeks, every month thereafter.

KEY OUTCOMES