

2020 Pediatric Abdominal Injury Clinical Guideline

Isolated Blunt Abdominal Injury

PED+

Start

Age ≥ 5 years

Torso ecchymosis, bruising; seat belt sign
Abdominal pain; tenderness
Abdominal distention; rigidity
Emesis
*Concerning mechanism

Age < 5 years

Torso ecchymosis, bruising; seat belt sign
Abdominal pain; tenderness
Abdominal distention; rigidity
Emesis
*Concerning mechanism

Hemodynamically stable ?

YES

CT of abdomen w/ IV contrast

ANY of the following

- Free air
- Pancreas injury
- Hollow organ injury
- Solid organ injury Grade ≥ 3

YES

Transfer to PED1

ANY of the following

- CT negative with symptoms
- Solid organ injury Grade 1 or 2

YES

Admit

ALL of the following

- Asymptomatic > 2 hours
- Passed oral challenge without antiemetics
- Age-appropriate ambulation
- CT negative

YES

Consider discharge

Transfer to PED1

If hemodynamically unstable

NS 20 mL/kg

If hemodynamics not improved

10-20 mL/kg PRBC

Repeat transfusion as needed and continue during transport
Expeditious transfer

If symptoms persist > 24 hours post admission, consider a pediatric surgery consult

*Concerning mechanism

Fall > 10 feet
High speed motor vehicle crash
Auto versus pedestrian
Ejection from vehicle
Physical Abuse

This algorithm does not replace clinical judgment and is not intended to be prescriptive for all patients.