

Key management questions

1. OPERATIVE MANAGEMENT

1. What are the indications for operative management (OM) of blunt liver injuries?

I. NON-OPERATIVE MANAGEMENT

2. What are the indications for non-operative management (NOM) in blunt liver injuries?

II. ANGIOGRAPHY/ANGIOEMBOLIZATION

3. What are the indications for angiography/angioembolization (AG/AE) in blunt liver injuries?

III. TRANSFER TO HIGHER LEVEL OF CARE

4. What are the indications for transfer of patients with blunt liver injuries to a higher-level trauma center?

IV. ACUTE HOSPITAL CARE

5. When is supplementary imaging required in the hospitalized patient?
6. What type and duration of monitoring are necessary for patients with blunt liver injuries?
7. What are the common complications and their management in patients with blunt liver injuries?
 - a. Pseudoaneurysm
 - b. Biliary complications (biloma, bile leak, biliary fistula)
 - c. Liver abscess/necrosis
8. What activity restrictions should be imposed on patients with blunt liver injuries, in hospital and post-discharge?

V. VENOUS THROMBOEMBOLISM (VTE) PROPHYLAXIS

9. What is the optimal timing for initiating DVT prophylaxis in patients with blunt liver injuries?

VI. POST HOSPITAL CARE

10. What is the optimal timing for repeat imaging after blunt liver injury?
Which imaging modality should be used to follow-up blunt liver injury?