

Title: TREATMENT OF RETROPERITONEAL BLEED

Responsibility: The trained and competent Registered Nurse (RN), or physician.

Purpose of Guidelines: To provide guidance for the treatment of patients suspected of having a retroperitoneal bleed.

Procedure:

Once a retroperitoneal bleed is suspected (as evidenced by moderate to severe back pain, ipsilateral flank pain, vague abdominal or back pain, hypotension, or tachycardia), the following steps should be completed:

1. Immediately notify the physician
2. Draw a type and screen
3. Draw an H & H immediately, and Q4 hours
4. Upon the direction of the physician, open fluids
5. Make the patient ICU status, with Q1 hour vitals and bladder pressure monitoring, assessing the site of the bleed as needed
6. Hold anticoagulation
7. Upon the direction of the physician consider the following:
 - a. CT Scan with contrast
 - b. Manual compression
 - c. Placing central lines, and arterial blood pressure monitoring
 - d. Repeating a CT in the morning

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Approved:

Reviewed: 2/17, 1/20, [1/23](#)

Revised:

Reviewed by Policy & Standard Committee 2/17, 1/20, [1/23](#)