NURSING SERVICE GUIDELINES
GENERAL

Guideline: **TREATMENT OF RETROPERITONEAL BLEED**

Policy Number Superseded: None

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.

Effective Date:
July 2025

Initial Effective Date:
February 2017

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 blood 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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