

Penetrating Abdominal Injury

Initial assessment

- ABCs
- Assess; V/S, LOC, Traumatic shock
- Assess: bleeding, abdominal signs, ecchymosis, wound, tenderness, pain, guarding
- PR
- Incident history; Mechanism of injury

Notify Trauma physical/General physician

Hemodynamic stable

- O₂ mask with reservoir bag 10-12 LPM
- Fluid management
- **If external bleeding:** control bleeding, wound care
- Keep warm
- Trauma lab, G/M
- Prepare adjuncts: foley cath, N-G tube, ECG
- Prepare for: diagnostic imaging, diagnostic procedures
- Prepare for: surgical treatment, consent form
- Monitor: V/S, O₂ sat, LOC, bleeding, abdominal signs, urine output
- Inform caregiver, mental support
- Nursing record

Hemodynamic unstable

- Hold mask with reservoir bag 10-12 LPM
- Assisted in endotracheal tube
- Initiate 2 large bore IV, fluid therapy **keep SBP 80-100 mm.Hg.**
- **If external bleeding:** control bleeding, wound care
- Keep warm
- Trauma lab, G/M
- Prepare adjuncts: Foley cath, N-G tube, ECG
- Prepare for: diagnostic imaging, diagnostic procedures
- Prepare for: surgical treatment, emergency operation, consent form, medication administration
- Monitor: V/S, N/S, O₂ sat, LOC, bleeding, abdominal signs, urine output
- Inform caregiver, mental support
- Nursing record

Reassessment

Definite Care
to OR/ ICU/Unit
transfer

