Consider ED Discharge

- Pain is controlled with oral medications
- Adequate mobility & safe disposition
- Oxygenation at baseline
- IS Vol > 1500 ml

Discharge with Rib Fracture

- Pain Control
- Incentive spirometer and instructions
- All discharges should include “Going Home with a Chest Injury” handout.

CTA Recommended for Rib Fracture Patients

- Age > 40
- Concerning mechanism of injury (MVC rollover, head-on, high speed, or ejection; bicycle accident, motorized recreational vehicle, or fall > 5 stairs or 3 feet)
- Abnormal vitals
- Suspicion of arterial bleeding
- Pneumothorax or hemotorax on CXR
- Multiple rib fractures (2 or more)
- Pain requiring IV narcotics

Otherwise, a routine CT chest with contrast would be recommended.

Rib Fracture Risk Stratification

Patients with identified rib fracture are automatically stratified to appropriate risk category when Adult Rib Fracture focused order set is selected.

**Severe (any are true)**
- Age > 65 & 3+ rib fractures
- S/F ratio < 235
- Severe pain despite IV narcotics
- Respiratory rate <10 or >29
- Intubated

Consider Admit to ICU

**Moderate (patient does NOT meet SEVERE criteria and any are true)**
- Age > 65 & 1-2 rib fractures
- Any age & 3+ rib fractures
- S/F ratio >235 but < 315

Consider Admit to Step Down

**Mild (patient does NOT meet SEVERE or MODERATE criteria and any are true)**
- Age < 65 AND any rib fracture

Consider Admit to Floor or Observation

Admit Patient with Appropriate Trauma Order Set

- OBS MED TRAUMA MANAGEMENT OBSERVATION ADULT
- MED SUR TRAUMA ADMISSION ADULT
- ICU ADMISSION ADULT

Select Adult Rib Fracture Focused Order Set

**Multimodal Pain Management**
- Scheduled narcotics, acetaminophen, NSAIDS and muscle relaxants and topicals as appropriate
- Non-pharm pain interventions (ice packs, splinting)
- Consider epidural, rib or paravertebral block
- Consider Pain Service Consult

**Pulmonary Hygiene**
- Nursing assessment of IS, Cough and Deep Breathing
- Forced Vital Capacity
- Flutter Valve
- CPAP/BiPAP as appropriate
- Continuous O2 Sats (Moderate & Severe)

**Consults as Needed**
- Pain / RAPS
- Palliative Care
- Thoracic Surgery for Rib Fixation
- Nutrition

**Ancillary Consult & Evaluation**
- PT/OT

Rib Fracture Treatment Guideline

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