Spontaneous Bacterial Peritonitis

Indications for paracentesis:
- Fever
- Abdominal pain
- Vomiting or diarrhea
- Hypotension
- AMS
- New or worsening ascites
- Hospital admission

Ascitic fluid:
- Cell count
- Culture plus stain
- Protein
- Albumin
- Glucose
- LDH
- pH
- Amylase
- Bilirubin (tt dark)

Subtract 1 PMN for every 250 RBC

Initial orders:
- CBC
- BMP
- LFT
- PT-INR
- Lipase
- UA

Consider imaging or surgery consult

Patient with ascites due to cirrhosis and concern for spontaneous bacterial peritonitis

Peritoneal signs

Vitals, H&P

Unstable VS

Resuscitate

Indications for Paracentesis:
- Assess with U/S
- Obtain ascitic fluid
- Bedside culture

PMN >250 cells/mm³

Yes

No

Manage non-urgent medical complaints

Symptoms of infection?

No

Consider discharge if reliable follow up available

Empiric antibiotic therapy

Give IV albumin if:
- C-reactive protein >1
- Serum bilirubin >4
- BUN >30

Admit