

Decompensated Cirrhosis Care Bundle

Decompensated cirrhosis is a medical emergency and carries a high risk of death. Mortality in hospital as high as 10-20%. Timely and evidence-based interventions can reduce death, morbidity and reduce hospital stay. Care bundles like this checklist have been demonstrated to improve the quality of care in decompensated cirrhosis.

This checklist has been designed to optimally manage patients with decompensated cirrhosis within the first 24 hours of hospitalisation, where specialist Gastroenterology or Liver consultation may not be immediately available.

This checklist should be filled out for all patients with decompensated cirrhosis **within the first 6 hours of hospitalisation** at the point of care (e.g., Emergency Department, Medical Assessment Unit, Hospital Ward). Consider escalating care if there has been no improvement in the clinical status of the patient after 6 hours.

Patients should be discussed with a Gastroenterology or Liver service as soon as possible.

The checklist has been designed to be modified by adding links to local protocols. It can be filled out electronically or printed.

Click [here](#) to access the checklist as editable PDF.

Click [here](#) to access the checklist as word document.

Additional helpful links

UK Cirrhosis Care Bundle:

- <https://www.bsg.org.uk/clinical-resource/bsg-basl-decompensated-cirrhosis-care-bundle-first-24-hours/>
- <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5412833/pdf/APT-44-1030.pdf>

European Association for the Study of the Liver (EASL) clinical practice guidelines for the management of patients with decompensated cirrhosis:

- <https://easl.eu/wp-content/uploads/2018/10/decompensated-cirrhosis-English-report.pdf>

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