

Guidelines referenced

ORGANIZATION	TITLE, YEAR	CITATION	GRADING SYSTEM
Eastern Association for the Surgery of Trauma	Selective nonoperative management of blunt splenic injury, 2012 ¹	EAST 2012	<p>Level 1: Convincingly justifiable based on available scientific information alone. Supported by prospective randomized studies or prospective, noncomparative studies or retrospective series with controls.</p> <p>Level 2: Reasonably justifiable by available scientific evidence and strongly supported by expert opinion. Supported by prospective, noncomparative studies or retrospective series with controls or a preponderance of retrospective analyses.</p> <p>Level 3: Supported by available data but lacking adequate evidence. Supported by retrospective analyses.</p>
World Society for Emergency Surgery	Splenic trauma, 2017 ²	WSES 2017	<p>1A: Strong recommendation, high-quality evidence</p> <p>1B: Strong recommendation, moderate-quality evidence</p> <p>1C: Strong recommendation, low-quality or very low-quality evidence</p> <p>2A: Weak recommendation, high-quality evidence</p> <p>2B: Weak recommendation, moderate-quality evidence</p> <p>2C: Weak recommendation, low-quality or very low-quality evidence</p>

ORGANIZATION	TITLE, YEAR	CITATION	GRADING SYSTEM
<p>Eastern Association for the Surgery of Trauma</p>	<p>Vaccination after spleen embolization: A practice management guideline from the Eastern Association for the Surgery of Trauma, 2022³</p>	<p>EAST 2022</p>	
<p>World Society for Emergency Surgery</p>	<p>Follow-up strategies for patients with splenic trauma managed non-operatively: the 2022 World Society of Emergency Surgery consensus document⁴</p>	<p>WSES 2022</p>	<p>GRADE methodology</p>

ORGANIZATION	TITLE, YEAR	CITATION	GRADING SYSTEM
<p>Research consortium of American College of Surgeons Level 1 pediatric trauma centers</p>	<p>Non-operative liver and spleen injuries in children 2015⁵</p>	<p>ATOMAC</p>	<p>GRADE</p> <p>1A: Strong recommendation, high-quality evidence</p> <p>1B: Strong recommendation, moderate-quality evidence</p> <p>1C: Strong recommendation, low-quality or very low-quality evidence</p> <p>2A: Weak recommendation, high-quality evidence</p> <p>2B: Weak recommendation, moderate-quality evidence</p> <p>2C: Weak recommendation, low-quality or very low-quality evidence</p>
<p>American Association of Pediatric Surgeons (APSA)</p>	<p>Non-operative management of pediatric Solid Organ Injury, 2019⁶</p>	<p>APSA</p>	<p>Oxford Centre for Evidence-Based Medicine (OCEBM)</p> <p>Level of evidence I–V</p> <p>Grade of recommendations:</p> <p>A: Consistent, Level 1 studies</p> <p>B: Consistent Level 2 or 3 studies or extrapolation from Level 1 studies</p> <p>C: Level 4 studies or extrapolation from Level 2 or 3 studies</p> <p>D: Level 5 evidence or inconsistent or inconclusive studies</p>