AAST Kidney Injury Clinical Guidance

AAST guidance for reporting kidney injuries detected on CT

Renal injury occurs in about 10% of significant blunt abdominal trauma, and most are minor. Contrast-enhanced CT is the modality of choice for grading and guides triage between observation, angioembolization, and surgical exploration.

This module encodes the AAST 2025 Kidney Organ Injury Scale for trauma CT reporting. Structured descriptors are specified for each kidney—hematoma type and rim distance, pararenal extension, parenchymal contusion, laceration length, partial or complete infarction, urinary extravasation, ureteropelvic junction disruption, multifragmented kidney, contained versus uncontained vascular injury, and main renal artery or vein injury—and the tool assigns a grade from I through V and generates standardized impression text, which can be inserted into the report to direct urology and interventional consultation.

Citation

Keihani S, Tominaga GT, Matta R, et al. Kidney organ injury scaling: 2025 update. *J Trauma Acute Care Surg* 2025;**98**:448–451.

Summary

