

Acute Liver Failure Red Flags

Recognition and early transplant-center referral

Gastroenterology

PHYSICIAN REFERENCE

Recognize

- Acute liver injury with coagulopathy and encephalopathy in a patient without established cirrhosis is an emergency.

Immediate

- Identify cause including acetaminophen/toxins/viral/autoimmune; check glucose, lactate, INR, renal function, ammonia as clinically useful.

Escalate

- Early transplant-center discussion; monitor cerebral edema, hypoglycemia, infection, AKI and multiorgan failure.

Clinical safety note

Use this as a memory aid, not a prescription. Verify current guidelines, local protocols, contraindications, renal/hepatic dosing, pregnancy status, interactions and patient-specific factors before treatment.