

FOR PEOPLE AGED 16 AND OVER

HEAD INJURY

Any following risk factors present:

- GCS ≤ 12 on initial assessment
- GCS < 15 at 2 hours after injury
- Suspected open or depressed skull fracture
- Any sign of basal skull fracture:
 - Haemotympanum / CSF leakage from nose or ears /
 - 'Battle's sign' / 'Panda eyes'
- Post-traumatic seizure
- Focal neurological deficit
- More than one episode of vomiting since the head injury

YES

Call Senior

CT Head
Within 1 hr of Head
Injury

NO

LOC / Amnesia since
head injury

YES

Any risk factors present:

- Age > 65 years
- A history of bleeding or clotting disorder
- Dangerous mechanism of injury:
 - Pedestrian / Cyclist struck by a motor vehicle
 - Occupant ejected from a motor vehicle
 - Fall from height of > 1 metre or 5 stairs
- > 30 minutes' retrograde amnesia of events immediately before the head injury

Radiology report
within 1 hour
Discuss with
Senior

NO

YES

CT Head
Within 8 hrs of
Head Injury

Or within 1 hour if > 8
hours after head injury

NO

Patient taking
Anticoagulation or
Antiplatelet
medication

- Vitamin K antagonists
- DOACs
- Heparin
- Antiplatelet (excluding Aspirin monotherapy)

Consider
CT Head

YES

No CT imaging
required

NURSING OBSERVATIONS

Required minimum observations:

- GCS
- Pupil size + Reactivity
- Limb movements
- Physical Observations:
 - RR / HR / BP / Temp / O₂ sats

GCS

< 15

15

Nursing Observations:

- Half hourly on-going

Nursing Observations:

- Half hourly for 2 hours
- Then 1 hourly for 4 hours
- Then 2 hourly

Patient deteriorates:

- Doctor to re-review

Patient deteriorates:

- Doctor to re-review
- Resort to initial nursing observations schedule

Doctor re-review - if any of following present:

- Drop of 1 point GCS sustained for ≥ 30 mins
 - Greater weight given to drop in motor response
- Drop of 3 or more points in the eye-opening or verbal GCS scores
- Drop of 2 points in the motor GCS score
- Development of agitation or abnormal behaviour
- Development of severe or increasing headache or persisting vomiting
- New neurological deficit

Call Senior

CT Head
Immediately