## **Head injury**

Clinical assessment / management tool for children





## **Management - Paramedic**

Clinical findings	Green – low risk
Age	1+
Mechanism of injury	Low risk ie fall from standing height
Conscious level	<ul> <li>No LOC</li> <li>Cried immediately</li> <li>Alert and interacting normal</li> </ul>
Headache	Not present
Bruising/swelling	None or small/firm
Vomiting	0-2
Other	No red features

## Green Action (Only in those 1+ years)

- Provide Head Injury safety netting advice via text share or by printing onsite
- Confirm they are comfortable with the decisions / advice given
- · Always consider safeguarding issues.

Clinical findings	Red – high risk
Λαο	<1
Age	
Mechanism of injury	High risk ie fall from > child's standing height, RTC etc
Conscious level	Any LOC
	Any drowsiness
	Any amnesia
	Post traumatic seizure
Vomiting	3+
Bruising/swelling	>5cm or boggy
Headache	Present
Other	Additional parent/carer concerns
	Concerns about alcohol intoxication / drug use
	• Signs of basal skull fracture (panda eyes, CSF leakage
	from ears/nose, bruising behind ears)
	• Clotting disorder
	Any safeguarding concerns

## **Red Action**

- Transfer immediately to local Emergency Department
- Commence Oxygen support to maintain Sats >92%
- Emergency transfer and Pre alert as necessary
- If patient is in distress/discomfort consider paracetamol +/- ibuprofen as per JR Calc

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