

## **Appendix B: Indications for Non-Contrast CT Scan of Head**

If none of these conditions are met, consider not ordering CT scan of the head:

- 1. GCS <13 when assessed (irrespective of time post injury)
- 2. GCS <15 two hours post injury (discuss with surgeon)
- 3. Any deterioration in condition
- 4. Suspected open or depressed skull fracture
- 5. Any sign of basal skull fracture
- 6. Post traumatic seizure
- 7. Focal neurological deficit
- 8. >1 episode of vomiting
- 9. Amnesia >30 min. for events prior to injury
- 10. LOC or amnesia and any of:
  - Age >65
    - Coagulopathy (bleeding/clotting disorder or anticoagulation, e.g. warfarin)
    - High risk mechanism, e.g. pedestrian vs. motor vehicle/ejected from vehicle/fall >1m
  - Additional considerations in children
    - Early vomiting is more common but ≥3 episodes should be considered significant
    - Tense Fontonelle
    - Bruising, swelling, laceration >5 cm if <1 year old</li>
      - NAI
      - Abnormal drowsiness
      - Anaesthetic and radiation relative risk/benefit. Consult with specialist.

Altered conscious level should be attributed to head injury until proven otherwise. The decision to CT should be applied regardless of the influence of intoxication.

July 2018 1