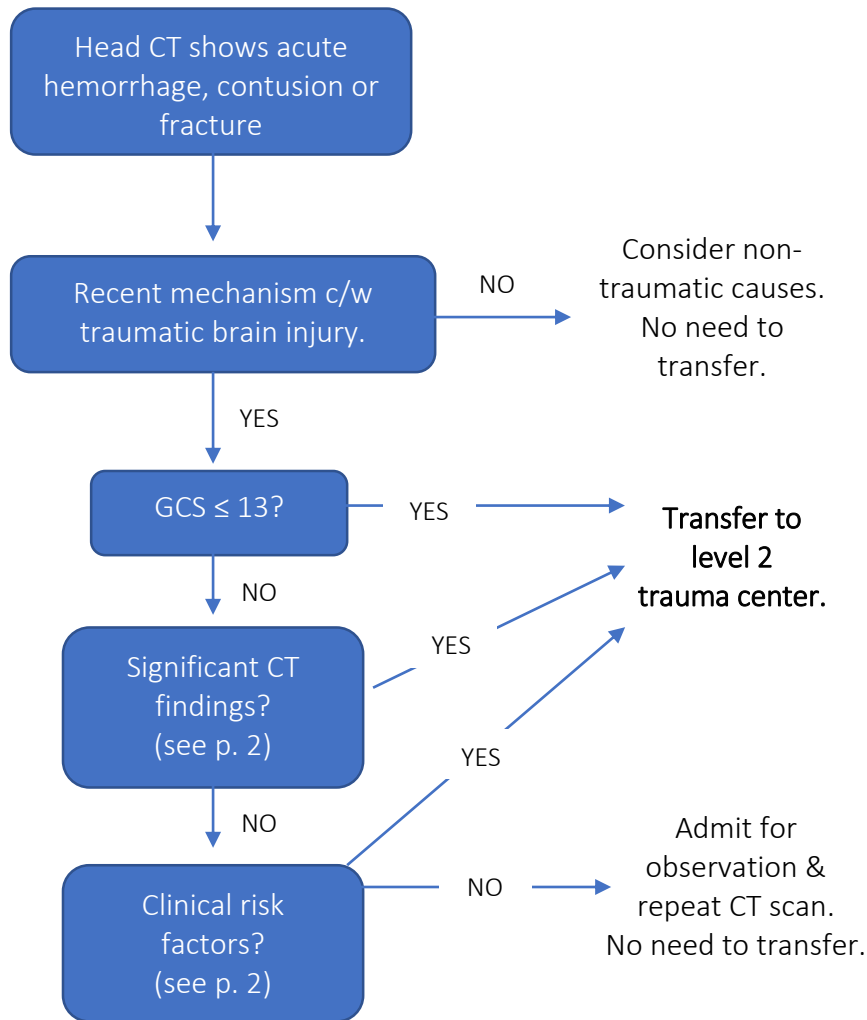


Adult TBI Guidelines for Triage & Transfer



The Level 2 Trauma Center Trauma Surgeon must review HEAD CT remotely and then enter a brief note in the EMR stating:

"I have reviewed the scans and discussed the patient with the ED physician. I believe that the patient meets criteria for observation at the primary facility and does not require transfer to the level 2 trauma center at this time. Please call the trauma surgeon via the Transfer Center at (253) 792-6531 with any questions or concerns."

Significant CT Findings (any one mandates transfer to the Level II trauma center):

1. Skull fracture (open or closed, depressed or non-depressed)
2. Midline shift ≥ 4 mm in thickness
3. Cerebral contusions: one-two ≥ 10 mm or multiple (three or more) ≥ 5 mm
4. Subarachnoid hemorrhage ≥ 5 mm in thickness
5. Acute Subdural hemorrhage: Thickness ≥ 5 mm (except when in the interhemispheric fissure or along the tentorium/skull base)
6. Epidural Hemorrhage ≥ 5 mm in thickness
7. Pneumocephalus

Clinical Risk Factors (any one mandates transfer to the Level II trauma center):

1. CSF Leak (bleeding from ears should not be confused with the CSF leak). Diagnosis of CSF otorrhea can be made at the bedside by visualizing clear fluid draining from the middle ear into external auditory meatus.
2. Penetrating intracranial trauma
3. New focal neurologic deficit (new pupil asymmetry, New dysconjugate gaze, Objective hemiparesis)
4. Recent use of newer anticoagulants (Xa inhibitors, thrombin inhibitors) antiplatelet agents such as clopidogrel, aspirin, or an elevated INR > 1.5 for any reason (liver disease or warfarin)
5. Pre-existing neurologic conditions that preclude determination of GCS (e.g. severe aphasia; severe developmental delay or cerebral palsy, etc.). Dementia, if at baseline, is not a disqualifying neurologic condition that mandates transfer to the level II trauma center.

Exclusion Criteria (any one of these mandates transfer to Level 2 Trauma Center):

- Any other injury requiring admission or observation
- New Focal Neurologic deficit (e.g. new pupil asymmetry, new dysconjugate gaze, new paralysis of one limb or one side of the body) even if CT scan is normal
- INR greater ≥ 1.5 for any reason if CT scan shows an injury