1.0 SCOPE
1.1. Any CCHMC employee who provides care to a Trauma Services Patient.

2.0 DEFINITIONS
2.1. Infants < 1yr of age with head injury admitted to Trauma Service
2.2. Abnormal head CT defined as any head CT with:
   2.2.1. Skull fracture
   2.2.2. Intracranial hemorrhage
2.3. Public setting defined as setting outside the home where there are individuals other than family members IE:
   2.3.1. Car accident
   2.3.2. Store

3.0 GUIDELINE
3.1. Complete primary and secondary survey per CCHMC guidelines (refer to Figure 1 below).
3.2. Obtain head CT if indicated
3.3. Normal head CT
   3.3.1. Consider other x-rays or studies if clinically indicated
3.4. Abnormal head CT: Was injury witnessed in public setting?
   3.4.1. If yes, injury witnessed in public setting - Consider other x-rays or studies if clinically indicated
   3.4.2. If no, injury was not witnessed in a public setting - Obtain: (if not already done in ED)
      1. Skeletal Survey
      2. AST/ALT, Lipase/Amylase, UA. Obtain Abdominal/Pelvis CT with contrast if AST/ALT >80, elevated lipase or UA >50 RBC. This may differ from trauma services blunt abdominal trauma guideline as we recommend CT in these cases to define NAT and not specifically for treatment/management of abdominal injury.
      3. Social Service Consult
      4. Refer to Child Abuse Team as indicated
      5. Refer to Standardized Physical Abuse Guideline in ED for further references
Trauma Services
Infant Head Injury Guideline
Infants Defined as <1 year of age

Complete primary and secondary survey

Obtain head CT if indicated

Abnormal head CT - Skull fracture - Intracranial hemorrhage

Was injury witnessed in a public setting such as:
- Car accident
- Fall at store

Yes

Consider other imaging or studies as clinically indicated

No

Obtain (if not already done in ED):
- Skeletal survey
- Obtain abdominal labs (ALT, AST, Amylase, Lipase, UA)
- Social Services consult
- Consult Child Abuse Team/Mayerson as indicated

Admit to Trauma Services
4.0 REFERENCES


5.0 APPROVALS

All revisions of this guideline are approved by the Trauma Service Department. This guideline is reviewed every three years or sooner if deemed necessary. Policy authority for this document resides with the Trauma Service Department. This guideline is approved by the Trauma Service Manager and the Director of Trauma Services.

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