

Guideline



CCHMC Trauma Services Guidelines

Title: Blunt Cerebrovascular Injury (BCVI)

Effective Date: 06/2022

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1.0 SCOPE

- 1.1. Care of the Trauma Services Patient at CCHMC.
- 1.2. This is the recommended guideline for any patient with concern for blunt cerebrovascular injury (BCVI).

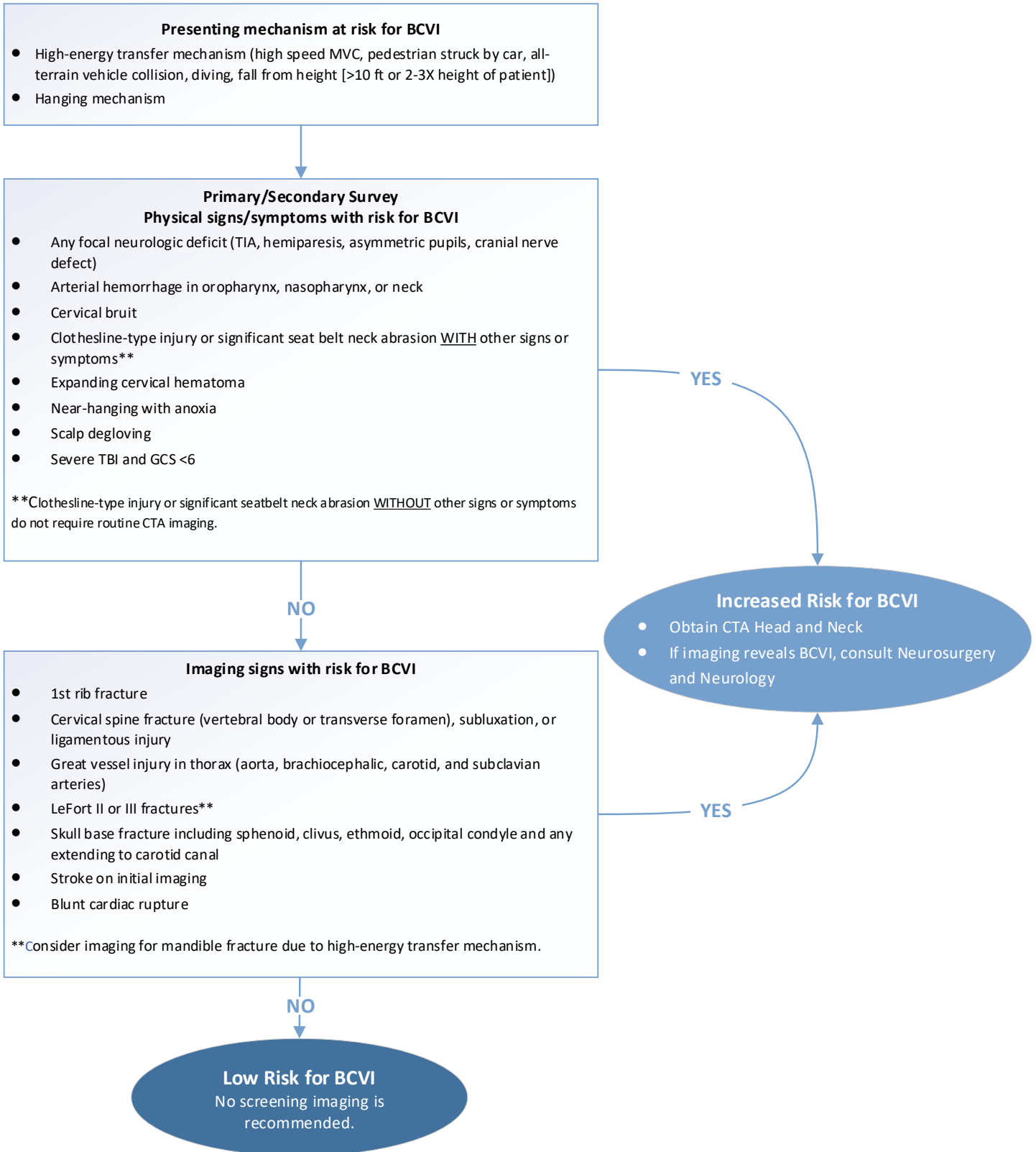
2.0 DEFINITIONS

- 2.1. Blunt cerebrovascular injury: Extracranial non-penetrating carotid and/or vertebral artery injuries which can result in cerebral infarct with associated morbidity and mortality
- 2.2. BCVI to carotid and/or vertebral arteries causes intimal tear leading to thrombus formation, wall hematoma or lumen occlusion and can progress to pseudoaneurysm

3.0 GUIDELINE

- 3.1. Refer to BCVI algorithm below

Blunt Cerebrovascular Injury (BCVI) Guideline



4.0 REFERENCES

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- 4.10. Mallicote, M. U., Isani, M. A., Golden, J., Ford, H. R., Upperman, J. S., & Gayer, C. P. (2019). Screening for blunt cerebrovascular injuries in pediatric trauma patients. *Journal of pediatric surgery*, 54(9), 1861-1865.
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- 4.13. Weber, C. D., Lefering, R., Weber, M. S., Bier, G., Knobe, M., Pishnamaz, M., ... & Hildebrand, F. (2019). Predictors for pediatric blunt cerebrovascular injury (BCVI): an international multicenter analysis. *World journal of surgery*, 43(9), 2337-2347.

5.0 APPROVALS

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

HISTORY
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6/22
Review Date