

Algorithm for penetrating head injury

Penetrated head injury

- (1) Tetanus toxoid
- (2) Antibiotic with oxacillin
- (3) Notify NS

missile

stab

- (1) Intubation
- (2) On IV with N/S hydration (1-2L)

- (1) No attempt to remove weapon
- (2) A, B, C
- (3) GCS

- (1) Progressive neurological deteriorate
- (2) Pupil dilatation
- (3) Hemiparesis

Brain CT

Consult NS

OR

(+) with stable BP and HR

(-)

- (1) Mannitol 1g/kg bolus
- (2) Phenytoin loading 18mg/kg

- (1) Brain CT
- (2) Consult NS
- (3) Complete shaving of head

Indicated for craniotomy

(+)

(-)

OR

GCS 14, 15

ICU

GCS ≤ 13

Observation

ICP monitor(±)

Indication for craniotomy:

- 1) GCS 3-5 with large extra-axial hematoma (?)
- 2) GCS 6-8 without transventricular injury, bi-hemispheric injury, or multiple dominant hemisphere injury
- 3) GCS 9-15

Indication for non-craniotomy (all of following):

- 1) Initial GCS > 10
- 2) Examination within 6 hours of injury
- 3) Diameter of entrance wound less than 2cm
- 4) No exit wound
- 5) No extra-axial hematoma
- 6) No intracerebral hematoma that was enlarging or measured more than 4cm in diameter