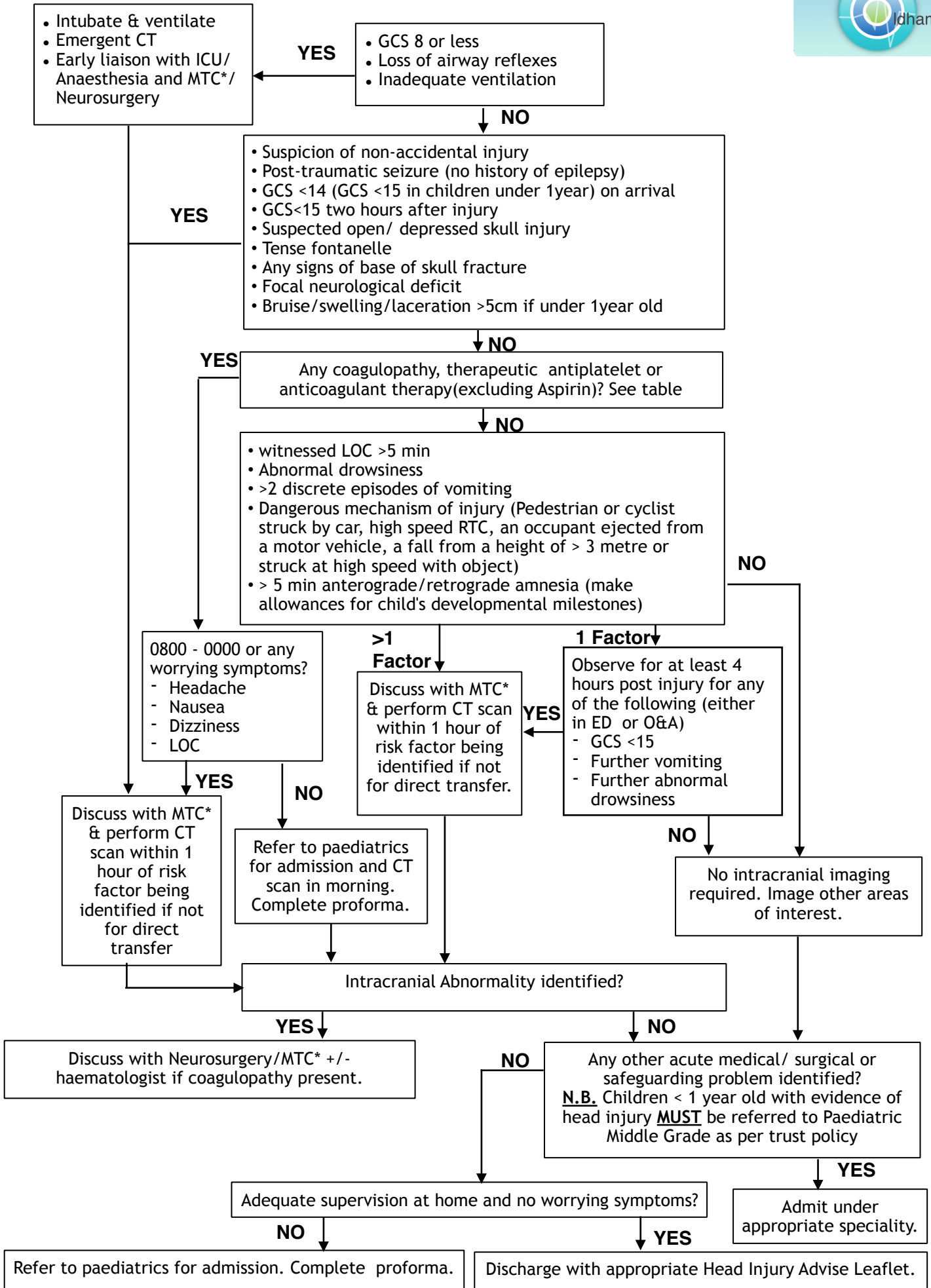


Paediatric Head Injury Algorithm



Paediatric Head Injury Algorithm



INDICATIONS FOR DISCUSSION WITH MAJOR TRAUMA CENTRE (MTC) *

Multisystem Trauma with likely ISS > 15

Royal Manchester Children's Hospital would like us to discuss any child that we are considering performing a CT Head on.

Discuss with the Trauma Team Leader on **01617019191**

COAGULOPATHIES LEADING TO INCREASED RISK OF INTRACRANIAL HAEMORRHAGES

Hereditary bleeding disorder (**must discuss with haematology immediately**)

Platelets <50 x 10³ per mm³

Treatment dose anticoagulation

- Warfarin/ Sinthrome with INR > 1.5
- Unfractionated Heparin
- Enoxaparin (Clexane) > 0.75mg/kg
- Dalteparin (Fragmin) > 120U/kg
- Tinzaparin (Innohep) > 175U/kg
- Fondaparinux (Arixta)
- Dabigatran (Pradexa)
- Rivaroxaban (Xarelto)
- Apixaban (Eliquis)

Significant antiplatelet therapy

- Clopidogrel (Plavix)
- Prasugrel (Efient)
- Ticagrelor (Brilique)
- Dipyridamole (Persantine)
- Abciximab (ReoPro)
- Eptifibatide (Integrilin)
- Tirofiban (Aggrastat)

Acquired coagulopathy (INR > 1.5 or fibrinogen <1) occurring from DIC, Sepsis or liver failure

Recent thrombolysis/catheter lab intervention