



# Head Injury Pathway Flow Chart

**Head injury/unwitnessed incident**

**Start and monitor Head Injury (HI) Observations and NEWS**  
(Residential HI – Telehealth) (Nursing HI – Glasgow Coma Scale)

**On anticoagulant therapy (warfarin, Rivaroxaban, Dabigatran, Apixaban, Heparin)**

<b>Bleeding that cannot be stopped</b>	<b>Confirmed loss of consciousness</b>
<b>Feeling nauseous or vomited</b>	<b>Post trauma fitting</b>
<b>Feeling dizzy or new blurred vision</b>	<b>New weakness in arms or legs</b>
<b>Change in normal behaviour</b>	<b>Red alert on HI Obs Chart (Telehealth)</b>
<b>Fluid leaking from ears/nose</b>	<b>(NICE Clinical Guidelines 176 Head Injury)</b>

**Yes**

**No**

**Care Home Policy:**  
Does not instruct that ALL Head Injuries need to go to hospital, only those who have been assessed as having a clinical need.

**Call 999**

**In Surgery Hours**  
Call your GP immediately to request a visit within 8hrs.  
If GP unable to visit within the 8hrs call 111\*6 for advice/999 for clinical assessment.

**Out of Hours**  
Call 111\*6 for advice/999 for clinical assessment.  
However, if surgery opens within the next 4hrs call your GP when open and request visit within next 4hrs.

**Hospital Yes**

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**Hospital No**

**On return from hospital**

Post head injury observation for 24-48 hours as per care home policy  
If concussion confirmed by hospital head injury observations for 72 hours  
Record results on Post Head Injury Observation Chart

**Red Alert on HI Obs/Deterioration in Neurological Ob**