INDICATIONS FOR CTA HEAD & NECK AFTER TRAUMA

- Unexplained or incongruous central or lateralizing neurological deficit
- Evidence of acute cerebral infarct on CT scan of head – activate stroke team
- GCS \(<= 8\) due to head trauma and with no evidence of ICH on CT
- Facial fracture
  - LeFort II or III fracture
  - Basal skull fracture
  - Petrous fracture
  - Complex mandible fractures
- Cervical spine fracture
  - Subluxations (at any level)
  - C1-C3 fractures—with high mechanism of injury
  - Extension of fracture thru transverse foramen
- Cervical spinal cord injuries
- Hanging victims
- Major thoracic injuries for example, consider in combination, AIS chest \(>3\) the following injuries:
  - First rib fracture
  - Thoracic aorta or major vessel injury
  - Sternal fracture

Due to high mechanism of injury or low mechanism: Discuss with attending

➢ Discuss prior to ordering with Trauma Attending if patient is:
  - Age \(> 55\) with HTN and/or DM and/or CKD
  - If previous contrast load

References: