Children's Health Ireland at Crumlin

NURSING CARE PLAN No 10

HEAD INJURY

Please use in conjunction with careplan 1

Full Name: .....

Address: Addressograph

.....

HCR.....

Care Plan No 10 Problem	Head Injury	Issue Date: December 2020 Review Date: December 2023
..... Sustained a head injury related to	• Assessment and prevention of neurological deterioration • Prompt detection and reporting of changes in neurological status. • Management of any changes in neurological status.	

No	NURSING INTERVENTION	Commencement, Date, Signature, Time, Grade	Discontinued, Date, time, Signature, Grade
1	**Neurological Observations**		
Record neurological observations (Using the Glasgow Coma scale, GCS) and observations as follows: • ½ hourly for 6 hours • Hourly for 6 hours • 2 hourly for 6 hours • Continue 2 hourly if fracture present (more frequently if team requests) • 4 hourly if stable and no fracture present Observation frequency will be increased if deterioration in the child's condition is noted.			
2	**Observations**		
• Nurse child where they can be observed easily. • Monitor child's vital signs and escalate any concerns as per PEWS protocol. • Nurse child on pulse oximetry overnight. Observe for any signs of respiratory depression. Document and report any abnormalities or concerns. Observe for deficits in neurological status and request review by orthopaedic team in the case of any the following: • Agitation, confusion or any unusual behaviour • A decrease in the child's level of consciousness • A decrease by 1 point in the motor or verbal response in GCS • A decrease x 2 points in the eye opening responses in GCS. • Development of severe or increasing headache • Persistent vomiting • Development of a new neurological sign e.g. 1. Unequal pupils 2. Seizures/convulsions or any abnormal limb movements 3. Limb strength deficits 4. Abnormal facial movements 5. Irritability 6. Drowsiness/ Light- headedness/ Dizziness 7. Raised fontanelle (in infants) 8. Sensitivity to light (Photophobia) 9. Blurred vision or double vision (diplopia) 10. Ringing in the ears (Tinnitus)			

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2	**Observations continued**.....	Commencement, Date, Signature, Time, Grade	Discontinued, Date, time, Signature, Grade
• Notable and/or persistent deviation in vital signs. • Balance or co-ordination issues (dyspraxia). • Fluid leaking from the child's ears (otorrhea) or nose (rhinorrhea). Accompany patient to radiology department, when necessary, where X-rays, CT and/or MRI may be required.			
3	**Patient / Parental Advice**		
• Facilitate and encourage parental involvement in patients care and ask parents/ guardian to raise any concerns with nursing staff. • Encourage patient to report promptly any new or ongoing symptoms. • Verbal and written advice on head injury will be given to _____ parents prior to discharge from hospital.			
4	**Discharge Advise**		
• Orthopaedic team will determine fitness for discharge. • Medical social worker will liaise with ward staff and family if required. • Advise family of any follow up appointment, which may be required. • Provide information about who to contact if any concerns raise at home.			
5	**Other Advice**		
Updated by Niamh Gleeson – Joes			

Created by xxxxx Department
Issue Date: July 2020 / Review Date: July 2023