## Adult Blunt Trauma Imaging Guidelines

### Trauma Head CT
- **Suspicion of head injury AND any one of the following are present:**
  - Taking Plavix oral anticoagulant or bleeding co-morbidity
  - GCS < 15 on arrival
  - Suspected open or depressed skull fracture
  - Any sign of basilar skull fx (hemotympanum, raccoon eyes, Battle’s sign, oto- or rhinorrhea
  - > 2 episodes of vomiting
  - Age > 65
  - Retrograde amnesia > 30 mins preceding incident
  - Dangerous mechanism (ped struck, ejection, fall > 3 ft or 5 stairs, etc.,)

### Trauma Face CT
- Physical exam is suggestive of midface or mandibular fracture

### CT Angio of Neck
- Neurologic abnormality not explained by diagnosed injury
- Arterial epistaxis
- Seat belt sign on neck
- GCS <8
- Petrous bone fracture
- C-spine fracture (C1-C3) or subluxation at any level
- Fracture through foramen tranversum
- LeFort II or III fractures

### Trauma Chest CT
- Order only for evaluation of thoracic aorta. Not for primary evaluation of the thoracic spine. Suspect aortic injury if sufficient mechanism and:
  - Wide mediastinum
  - Sternal fracture
  - First rib fracture
  - High velocity crash
  - Age > 50
  - Hypotension episode
  - Known abdominal injury
  - Torso crush injury

### Trauma Abdomen/Pelvis CT
- Not for primary imaging of the lumbar spine. Image if any of the following are present:
  - Abnormal abdominal, pelvic or lumbar spine exam
  - Positive FAST
  - Intubated patient
  - GCS ≤ 12
  - Intoxicated patient
  - Lumbar fracture on plain films
  - Controlled hemodynamic instability
  - Hematuria
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C-Spine CT – Image if any of the following are present, or unable to clinically clear:

- Age ≥ 65
- Paresthesias in extremities
- Fall > 3 feet or 5 stairs
- Axial load to head (e.g. diving)
- High speed MVC (> 60 mph)
- Rollover
- Ejection
- ATV, motorized bike, motorcycle
- Known thoracic or lumbar fracture

T-Spine CT – Image if any of the following are present:

- Spinal or paraspinous pain or tenderness
- Spinal deformity
- Known cervical or lumbar fracture
- High risk mechanism (see C-spine criteria)
- Unconscious or intoxicated
- Distracting injury

If Chest CT ordered

- □ Thoracic reconstruction of Chest CT

If CT not indicated with trauma mechanism

If too obese for x-ray

- □ Dedicated T-spine CT

L-Spine CT – Image if any of the following are present:

- Spinal or paraspinous pain or tenderness
- Spinal deformity
- Known cervical or lumbar fracture
- High risk mechanism (see C-spine criteria)
- Unconscious or intoxicated
- Distracting injury

If Abd/Pelvic CT ordered

- □ Lumbar reconstruction of Abd/Pelvic CT

If CT not indicated with trauma mechanism

If too obese for x-ray

- □ Dedicated L-spine CT